BENCHMARK PROPERTY MANAGEMENT, INC.
7932 Wiles Road · Coral Springs, Florida 33067 · Tel. (954) 344-5353 ·Fax (954) 344-5399 · www.benchmarkpm.com

URGENT

If your application is incomplete, it will be returned to you by mail along with any fee you may have submitted, and a list of the missing items.

You may then complete the application and re-submit it together with the required fee.

Please provide the name and address which you would like us to use if the application is incomplete and must be returned to you.

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone No. _____

E-Mail Address_____

If you do not fill in the information above, we will use the best address available on the application which you submitted.

SANDALFOOT SOUTH ONE, INC.
Revised: February 27, 2023

APPLICATION PROCEDURE

1. **Each and every question should be answered FULLY and to the best of your knowledge. Failure to do so will automatically nullify the application.**

2. **Any false information nullifies the application. Incomplete forms nullify the application. The 30-day period begins AFTER application is returned to Board filled out correctly and <u>completely</u>.**

3. **The APPLICATION should be presented to the Board of Directors with a non-refundale <u>money or bank check ONLY for $150 PER MARRIED COUPLE OR $150.00 PER PERSON 18 AND OVER, to be</u> used to pay for the cost of the investigation(s). Make payable to Benchmark Property Management, Inc.**

4. **We shall give a copy of the form to the investigative services to conduct the investigation.**

5. **When the report comes back from the investigative services, the Board will discuss information in private and make a decision.**

6. **If the decision is favorable, the Board will contract the broker and ask for an interview with the buyers. THE BROKER DOES NOT ATTEND THE INTERVIEW.**

7. **If the buyer does not meet our criteria, the broken will be notified. Any further discussion necessary or requested should be with the association's attorney. When accepted, the appropriate Approval papers will be supplied to the broker.**

8. **Please note there is a MINIMUM CREDIT score of 700 REQUIRED**

9. **Any applicant that has no social security number to provide the Association with, what would be the equivalent information from the country of origin. If the applicant fails to provide the Association with the required information (either a social security number for a domestic background, credit and criminal checks or an equivalent background report from the country of origin), the application will be incomplete, at which time it may be denied by the Board.**

SANDALFOOT SOUTH ONE, INC.

THIS COMMUNITY OPERATES AS HOUSING FOR PERSONS 55 YEARS OF AGE OR OLDER

Dear Applicant,

Please complete and submit the enclosed application together with a **Non-refundable** fee of $150.00 **per married couple OR $150.00 per person over 18 years of age**. The fee must be in the form of a money order or bank check made payable to Benchmark Property Management, Inc. (**cash and personal checks will not be accepted**). All paperwork **MUST** be **COMPLETED IN FULL**. Incomplete paperwork will result in delaying the application process or immediate denial.

As well as the application, the Association needs the following information to be provided by the applicant:

1. **Copy of all occupants' driver's licenses or the equivalent.**
2. **A legible copy of the contract for sale.**
3. **A recent copy of applicant's bank statement.**
4. **Each adult applicant other than a married couple must complete a separate application**

***A MINIMUM CREDIT SCORE OF 700 REQUIRED**

****Any applicant that has no social security number to provide the Association with, what would be the equivalent information from the country of origin. If the applicant fails to provide the Association with the required information (either a social security number for a domestic background, credit and criminal checks or an equivalent background report from the country of origin), the application will be incomplete, at which time it may be denied by the Board.**

The application process takes approximately 3 – 4 weeks. However, failure to present the necessary documents **will** result in a delay of your application. The application may be mailed or hand-delivered to:

Benchmark Property Management, Inc.
7932 Wiles Road
Coral Springs, Florida 33067
Attention: Heather Bramos

We thank you and we look forward to meeting with you. Board of Directors
Sandalfoot South One, Inc.

Transaction Type Check One ccupancy Change ( )	APPLICATION TO			
	RENT ( )	PURCHASE ( )	RENT RENEWAL ( )	TITLE TRANSFER ( )

NAME OF APPLICANT:_____ SS#_____ AGE _____
SPOUSE'S NAME: _____ SS# _____ AGE _____
APPLICANT'S ADDRESS: _____PH: _____
CITY, STATE, ZIP: _____

PLEASE LIST ALL OCCUPANTS WHO WILL RESIDE AT THE ADDRESS, IF APPROVED:

NAME	RELATIONSHIP TO APPLICANT	DATE OF BIRTH

_____

_____
—
_____

NAME OF EMPLOYER, ADDRESS AND PHONE: _____

_____

IN CASE OF EMERGENCY, PLEASE NOTIFY:NAME: _____

RELATIONSHIP: _____ PHONE # _____

NAME OF ATTORNEY, REALTOR OR TITLE COMPANY: _____

ADDRESS: _____ PHONE _____

SOCIAL REFERENCES: (List 2 with complete addresses and phone numbers) – NO REALTORS OR FAMILY MEMBERS PLEASE).
(1) _____ ( ) _____

(2) _____ ( ) _____

BANK REFERENCES: (List 2 with complete addresses and account numbers).

1. _____ ACCT. # _____
2. _____ ACCT. # _____

VEHICLE INFORMATION: (List all vehicles you intend to park on the property)
(1) MAKE: _____ MODEL: _____ LICENSE PLATE # _____

(2) MAKE: _____ MODEL: _____ LICENSE PLATE # _____

$150.00 APPLICATION FEE AND COPY OF THE CONTRACT OF SALE MUST ACCOMPANY APPLICATION BEFORE THE PROCESSING CAN BEGIN. APPLICATION FEE IS NON REFUNDABLE. Please pay particular attention to the following.

SUBLEASING IS NOT ALLOWED.

THERE WILL BE NO LEASE RENEWALS WITHOUT BOARD APPROVAL.

NO PETS ALLOWED.

a) I/We authorize Sandalfoot South One Condominium Association, Inc. or their attorney or representative, any information they seek about my banking, credit, residence, employment and background in reference with or to my/our application made for residence.

b) I/We have completed this application truthfully and accurately. I am aware that if any information on this application is found to be untrue that it may result in application to the Association being disapproved.

_____ _____ _____ _____

Applicant's Signature Date Applicant's Signature Date

PPROVED _____ APPROVED _____

Benchmark Property Management, Inc. Homeowner/Condominium Association

Sandalfoot South One, INC.
c/o Benchmark Property Management, Inc.
7932 Wiles Road
Coral Springs, Florida 33067
(954) 344-5353 Fax (954) 344-5399

CERTIFICATE

I/We _____

Certify to the following:

1. That Purchaser(s) has/have purchased (or in process of Purchasing)

_____

at Sandalfoot South One, Inc.

2. The Purchaser(s)_____

is/are over the age of 55. (At least ONE owner/resident must be 55+) Less than 55 resident or owner / resident cannot reside in unit without the 55+ owner present.

_____ _____
Witness Purchaser

_____ _____
Witness Purchaser

_____ _____
Witness Renter

_____ _____
Witness Renter

_____
Date

PROOF OF AGE MUST ACCOMPANY THIS FORM

BENCHMARK PROPERTY MANAGEMENT, INC.
7932 Wiles Road · Coral Springs, Florida 33067 · Tel. (954) 344-5353 · Fax (954) 344-5399 · www.benchmarkpm.com

Authorization to Perform Background Check

I hereby authorize Benchmark Property Management, Inc., as agent for Sandalfoot South One, Inc. (herein the "Association"), to obtain a consumer report, and any other information deemed necessary by the Association, for the purpose of the Association evaluating my application. I understand that such information may include, but is not limited to, my credit history, civil and criminal information, records of arrest, rental history, employment/salary details, vehicle records, licensing records, banking information and/or any other necessary information. I understand that subsequent consumer reports may be obtained and utilized under this authorization in connection with an update, renewal, extension or collection with respect to or in connection with the rental, lease or purchase of a residence for which this application was made. I hereby expressly release Benchmark Property Management, Inc. and any procurer or furnisher of information, from any liability what-so-ever in the use, procurement, or furnishing of such information, and understand that my application information, including Social Security Number, shall remain confidential except through court order or subpoena as provided under relevant law.

Applicant Signature _____ Date_____

Applicant Signature_____ Date_____

Sandalfoot South One, Inc.
c/o Benchmark Property Management, Inc.
7932 Wiles Road
Coral Springs, Florida 33067
(954) 344-5353 Fax (954) 344-5399

RULES AND REGULATIONS

It is the purpose of your Association to preserve and protect well-managed condominium buildings and it is believed that these rules and regulations will aid in this purpose.

The rules and regulations are applicable to all owners, renters and guests.

Every effort has been made to insure that rules and regulations are in compliance with the by-laws of the Association.

In consideration of one another's interests and to insure the general welfare of all, it is advisable that residents and guests be familiar with and responsible for compliance with these rules and regulations; PLEASE READ THEM BEFORE PURCHASING.

- THE SELLER (CURRENT OWNER) SHALL PROVIDE THE PURCHASER WITH A COPY OF ALL CONDOMINIUM DOCUMENTS.

REQUIREMENTS AND RULES FOR GOVERNING THE GENERAL CONDUCT OF ALL RESIDENTS IN THE COMMON ELEMENTS OF Sandalfoot South One MAY BE ESTABLISHED AND ENFORCED BY THE ASSOCIATION.

REPEATED VIOLATION OF ANY OF THESE RULES WILL BE REFERRED TO OUR ATTORNEYS FOR PROPER ACTION.

Sandalfoot South One, Inc.

9840 Marina Blvd.
Boca Raton, Fl. 3428
(561) 482-8919

APPLICATION TO PURCHASE

THIS COMMUNITY OPERATES AS HOUSING FOR PERSONS 55 YEARS OF AGE OR OLDER.

APPLICATION DIRECTIONS

- **THIS APPLICATION AND THE ATTACHED APPLICATION FOR OCCUPANCY AND INTERROGATORY MUST BE COMPLETED IN DETAIL BY THE PROPOSED PURCHASER.**

- **Please ATTACH A COPY OF THE SALES CONTRACT TO THIS APPLICATION. Contract must show a deposit of at least a 20% down payment having been made.**

- An application fee **$150 per married couple OR $150.00 per person over 18 years of age**. The fee must be in the form of a money order or bank check (**cash and personal checks will not be accepted**). All paperwork **MUST** be
- **COMPLETED IN FULL**. Incomplete paperwork will result in delaying the application process or immediate denial.

- **PLEASE ATTACH A COPY OF THE DRIVER'S LICENSE AND /OR OTHER PICTURE I.D. FOR EACH PROSPECTIVE PURCHASER TO THIS APPLICATION.**

- **ALL PROSPECTIVE APPLICANTS AND PROPOSED RESIDENTS MUST BE PRESENT FOR A PERSONAL INTERVIEW SET BY THE BOARD OF DIRECTORS. OCCUPANCY PRIOR TO APPROVAL FROM THE BOARD OF DIRECTORS IS PROHIBITED.**

- **NO CHILDREN ARE ALLOWED TO BE PERMANENT RESIDENTS.**

- **NO PETS ARE ALLOWED AT ANY TIME.**

- **THE SELLER (CURRENT OWNER) SHALL PROVIDE THE PURCHASER WITH A COPY OF ALL CONDOMINIUM DOCUMENTS.**

- **PURCHASER MUST NOTIFY THE ASSOCIATION OFFICE WITH THE EXACT DATE OF THEIR CLOSING. (561) 482-8919**

- **NO MOTORCYCLES, TRUCKS, CARGO VANS, RECREATIONAL VEHICLES, ETC. ALLOWED. NO COMMERCIAL VEHICLES OF ANY KIND, INCLUDING TRAILERS, ALLOWED.**

- **A KEY SHOULD BE ON FILE WITH THE ASSOCIATION. IF KEY CANNOT BE OBTAINED IN CASE OF EMERGENCY, DOOR WILL BE BROKEN DOWN AND MUST BE REPAIRED AT THE UNIT OWNER'S EXPENSE.**

- **OCCUPANCY REGULATIONS = NO MORE THAN FOUR (4) OCCUPANTS ALLOWED PER UNIT AT ANY TIME.**

- **OCCUPANTS AGREE TO ABIDE BY ALL THE RULES, REGULATIONS, AND BYLAWS OF THE ASSOCIATION.**

- **ALL DOCUMENTS MUST BE SUBMITTED TOGETHER AT LEAST 30 DAYS PRIOR TO CLOSING.**

- **ORIGINAL APPLICATIONS ACCEPTED ONLY, NO FAXES, PHOTOCOPIES.**

PLEASE PRINT OR TYPE

DATE_____UNIT NO.#_____ DESIRED CLOSING DATE:_____

CURRENT OWNERS NAME: _____Phone:_____

OWNER'S PRESENT ADRESS_____

NAME(S) of prospective purchaser(s) (as title will appear)

A._____ B._____

NAMES, AGES, RELATIONSHIP TO OWNER AND OCCUPATION OF ALL PERSONS WHO WILL OCUPY THE UNIT:

NAME	AGE/DOB	RELATIONSHIP/OCCUPATION
_____	____/_____	_____
_____	____/_____	_____
_____	____/_____	_____
_____	____/_____	_____

1. In making the foregoing application, I represent to the Board of Directors. That the purpose for the purchase of a unit at Sandalfoot South One, is as follows: Permanent Residence Seasonal Residence, Other (State)_____

2. I/we understand that the acceptance for purchase of a condominium at Sandalfoot South One is conditioned upon the truth and accuracy of this application and upon approval of the Board of Directors. Occupancy prior to approval is prohibited.

3. I hereby agree for myself and on behalf of all persons who may use the apartment, which I seek to purchase that I will abide by all of the restrictions contained in the Rules and Regulations, and Declaration of Condominium, and By Laws of the Association, which are or may in the future be imposed by SANDALFOOT SOUTH ONE, INC.

4. I have received a copy of all Condominium Documents and Rules and Regulations: Yes___ No__

5. I shall be present when guests, relatives and children who are not residents occupy the apartment

6. I may not bring a pet nor may any guest or visitor bring a pet onto the SANDALFOOT SOUTH ONE, CONDOMINIUM, nor acquire one, wither temporarily or permanently after occupancy.

7. Application is subject to denial before or after the required interview.

8. I understand that the Administration Office will advise me within thirty (30) days from the date of interview, if granted, of either the acceptance or denial of this application, and that no reason need be given for either.

Applicant(s) agree(s) to observe the Rules and Restrictions stated previously as well as all of the terms and provisions stated in the Rules & Regulations, Declaration of Condominium, and By-Laws of the Association. Applicant(s) recognize(s) that any violation of said terms and provisions shall provide cause for immediate action as provided therein.

Signatures:

1-_____ 2-_____

SANDALFOOT SOUTH ONE CONDOMINIUM ASSOC., INC. Ref: Unit#_______

Interrogatories to be answered by prospective purchaser(s)

NOTE: The following questions must be answered truthfully and completely. No information should be withheld. Approval of the purchase will be determined in part on the basis of your replies to the questions. Any falsification, deception, withholding of pertinent information or misleading answers will justify disapproval.

Please complete all 14 pages,
and bring a picture I.D. with you to the interview (if granted).

****

1.(a) What (is /are) your full name(s) and present address(es) ?

A-

(b) Are the foregoing the same person(s) named in the original purchase application? If not explain;

A-

2- Will you be a permanent and full-time resident and occupant of the apartment you seek to purchase? If not explain;

A-

3-(a) Do you own any other real property (i.e.; house, condominium etc.) in Florida or elsewhere? If you do, set forth the locations and state whether you presently reside in any of these locations.

A-

(b) Do you lease or rent any of these properties to others?

A-

4- (a) Are you aware that according to the restrictions in the By-Laws that the Board of Directors of Sandalfoot South One must be notified and approval obtained if you plan to rent your unit? Also, that there is a $50.00 application fee for this?

A-

(b) Are you planning on renting this unit? (Within the restrictions that apply)

A-

5- Are you aware that according to restrictions in the By-Laws of the Association, rentals may only be 3 or 4 months in duration during the months of December 1st through April 30th ONLY? (3 months minimum & 4 month maximum to same person)

A-

6- Are you also aware that according to restrictions in the By-Laws of the Association each unit is allowed only one rental per calendar year? (within the restrictions that apply)

A-

7- Are you aware of the restrictions in the By-Laws requiring occupancy by at least one (1) person (in 80% of the units of the association) Fifty-Five (55) years of age or older required under the Fair Housing Amendments Act of 1988, and of the Association's rule that should the occupant(s) 55 years or older vacate the unit, occupants under the age of 55 years residing in the unit will not be permitted to remain?

A-

8- Do you know that our documents prohibit the permanent residence in a Unit of any children under the age of eighteen (18) years, (thought they may visit)?

A-

9- Do you agree that if approved, you will abide by and comply with the condominium documents, including the Declaration of Condominium, the By-Laws, and the Articles of Incorporation, as amended, which require, regulate, and control the use of and conduct on the condominium property?

A- **Initial_____**

Initial_____

10- Are you aware, that according to these By-Laws all garbage must be bagged before being put into containers?

A-

11- Are you further aware that according to resolutions passed by the Board of Directors NO newspapers are to be placed in the garbage containers?____ These containers are for garbage only. Newspapers are trash. Also, all other types of trash should not be put out until Sunday and Wednesday evenings (the night before pick up) as this represents an unsightly mess and detracts from the appearance of the grounds.

12- Are you aware that according to these By-Laws that nothing is to be placed or stored in the Electrical rooms?

A-

13- Are you aware that according to resolutions passed by the Board of Directors, the use of the Association laundry rooms is restricted to 8AM through 8PM? Also, that these rooms should be kept neat and clean by everyone, and the machines must not be overloaded, (NO rugs, large comforters, etc.). Also each person should clean the dryer filter after each use?

A-

14- Are you aware that according to the By-Laws the Board of Directors must be notified if the recreation room is to be used?

A-

15- Are you aware that according to Local Fire Safety Laws NO chairs, plants, or other items should be on the walkways? If chairs are used during the daytime they must be taken in for the night. NO plants are to be on the walkways, if plants are found on the walkways they will be thrown out.

A-

16- Are you aware that according to Local Fire Safety Laws, NO rugs should be placed on the stairwells? Also that nothing should be stored under the stairwells?

A-

17- Are you aware that NO one may occupy your apartment in your absence.

A-

18- Do you have any children?_____ How many?____ If so set forth all their names, ages, and addresses.

19- How many persons will reside in the unit permanently? _____ Are you also aware that only four(4) are allowed in a two bedroom apartment?_____ List all who will reside here, their ages and their relationship to the owner.

A-

20- Are you aware that maintenance assessment payment coupons should be sent with your check made payable to Sandalfoot South One, Inc. with your unit number and account number written on the check mail to:

Sandalfoot South One, Inc.
c/o Benchmark Property Management, Inc.
7932 Wiles Road
Coral Springs, Florida 33067

-CONTINUE TO NEXT PAGE -

Also, to avoid late fees monthly payments must be received on or before the 10th of each month.

A-

21- Have you or anyone listed on this form ever been convicted of a felony? If so, explain.

A-

22- Are you aware that you have only one (1) assigned parking space?

A-

23- Are you aware that you must supply the Board with a copy of the Deed once the sale has been registered?

A-

24- Are you aware that there are no pets or animals allowed? (NO dogs, cats etc.) Also that pets may not be acquired after occupancy and that the unit owner is responsible that no pets enter their units, or the property for any reason?

A-

25- Are you aware that NO business or commercial use is allowed?

A-

26- Are you aware that, if approved, as the purchaser you must notify the Association office with the exact date of your closing?

A-

27- Are you aware that visitors must park in the guest spaces of phase one only, and that overnight visitors must have a current, dated visitor parking tag, or be subject to towing?

A-

28- Are you aware that the seller should provide you with a set of keys that also include a key to the clubhouse/storage lockers?

A-

29- Are you aware that NO trucks, trailers, motorcycles, panel vans, recreational or commercial vehicles, etc. are allowed?

A-

30- Are you aware that No commercial vehicles of any kind, including trucks, trailers, motorcycles, vans, recreational vehicles etc. are allowed?

A-

31- What are/were your occupation(s)?

A-

32- Do you have any special skills, talent or expertise that you would be willing to share with your Association?

A-

33- Who recommended Sandalfoot South One to you?

A-

34- Are you aware that this is only a partial synopsis of the rules and regulations of the condominium, and that as a member of the community it is your responsibility to uphold and maintain all of our documents?

A- **Initial_____**

Initial_____

-CONTINUE TO NEXT PAGE -

36- Are you aware of the fact that the approval, <u>if given,</u> is based upon the reliance of <u>the truth of the statements made herein</u>, especially with respect to the occupancy and proposed use of the unit?

A- **Initial_____**

Initial_____

Date:_____ **_____**

Purchaser's Signature

_____

Purchaser's Signature

Witnesses:

#1 _____ **#2_____**

Please print name **Please print name**

_____ **_____**

Signature **Signature**

_____

STATE OF_____)

COUNTY OF_____) **SS#_____**

On the _____day of _____, 20_____, before me personally

Appeared _____ and _____
To me known and known to me to be the individuals described herein and who executed the foregoing Questionnaire and duly acknowledged to me that the answers given were true and they further acknowledged that they executed the same.

<u>My Commission Expires:_____</u> **_____**

Notary Public

[NOTORIAL SEAL]

-CONTINUE TO NEXT PAGE -

I/We am/are the proposed occupant(s) of Unit #_____ in Bldg.#_____At #_____Marina Blvd. In Sandalfoot South One Association, Inc. I/We understand that the community is required by Federal Law to verify the age of the occupants of the homes, if the community is to maintain it's qualification for the Housing for Older Persons Exemption to the Federal Fair Housing Amendments Act of 1988, as amended.

<u>THE FOLLOWING IS TRUE AND CORRECT</u>:
FULL NAME(S) OF PRESENT OWNER(S) OF UNIT

_____ _____

_____ _____

FULL NAME OF PROPOSED OCCUPANT (1)_____

FULL NAME OF PROPOSED OCCUPANT (2)_____

FULL NAME OF PROPOSED OCCUPANT (3)_____

FULL NAME OF PROPOSED OCCUPANT (3)_____

A. Please identify any proposed occupant(s) who is/are over 55 years of age:

Name_____ Date of Birth____/_____/_____

Name_____ Date of Birth____/_____/_____

Name_____ Date of Birth____/_____/_____

Name_____ Date of Birth____/_____/_____

B. Please identify all other proposed occupant(s):

Name_____ Date of Birth____/_____/_____

Name_____ Date of Birth____/_____/_____

Name_____ Date of Birth____/_____/_____

Current Address:_____

City_____ State_____ Zip_____ How Long?_____

☐ Own ☐ Rent

Previous Address:_____

City_____ State_____ Zip_____ How Long?_____

☐ Own ☐ Rent

-CONTINUE TO NEXT PAGE -

C. I/We have provided photocopies of one of the following items (at least one must be photographic) as proof of age for each occupant for the Association's records, and the same are attached hereto:

Check applicable documents provided:

Occupant (1) Name:_____

Relationship to owner_____

☐ Birth Certificate ☐ Driver's License ☐ Passport ☐ Military I.D.

☐ Immigration Card ☐ Other (specify)_____

Occupant (2) Name:_____

Relationship to owner_____

☐ Birth Certificate ☐ Driver's License ☐ Passport ☐ Military I.D.

☐ Immigration Card ☐ Other (specify)_____

Occupant (3) Name:_____

Relationship to owner_____

☐ Birth Certificate ☐ Driver's License ☐ Passport ☐ Military I.D.

☐ Immigration Card ☐ Other (specify)_____

Occupant (4) Name:_____

Relationship to owner_____

☐ Birth Certificate ☐ Driver's License ☐ Passport ☐ Military I.D.

☐ Immigration Card ☐ Other (specify)_____

NUMBER OF ITEMS ATTACHED _____

-CONTINUE TO NEXT PAGE -

OCCUPANT INFORMATION

NUMBER OF APPLICANTS RESIDING IN UNIT:_____

NAME:_____ Date of Birth:_____/_____/_____

NAME:_____ Date of Birth:_____/_____/_____

NAME:_____ Date of Birth:_____/_____/_____

NAME:_____ Date of Birth:_____/_____/_____

VEHICLE REGISTRATION

Vehicle Owner:_____ Make:_____ Model:_____

Year_____ Color_____ Lic.Plate #_____ State_____

Vehicle Owner:_____ Make:_____ Model:_____

Year_____ Color_____ Lic.Plate #_____ State_____

By signing this application, applicant(s) authorize(s) the Association And Renters Reference of Florida to investigate the character, general reputation and all references for the applicant(s). Association and may contact any person or business referenced in this application to verify information.

Print Name:_____ Print Name:_____

Signature:_____ Signature:_____

Print Name:_____ Print Name:_____

Signature:_____ Signature:_____

BELOW THIS LINE FOR OFFICE USE ONLY

Date Received:____/____/_____ Interview Date:_____/_____/_____

Attendees:_____

Bank (1)_____(2)_____ Character:_(1)_____ (2)_____

Approved / Denied Date: _____/_____/_____

-CONTINUE TO PAGE-

Sandalfoot South One, Inc.

9840 Marina Blvd. **(561) 482-8919 Boca Raton, Fl. 33428**

NEW OWNER INFORMATION

DATE:___/____/_____ **Unit #_____**

NEW OWNER'S NAME_____ D.O.B._____/____/_____

TENTATIVE CLOSING DATE:_____

□ PERMANENT RESIDENT **□ PART-TIME RESIDENT** **(check one)**

FL. PHONE #_____

Your Condominium Association will have several mailings per year, primarily during the months of November - February, which are extremely important for you to receive and often require a response from you. These mailings refer to budget issues, elections and financial reports. We therefore need a mailing address where you will be sure to receive these important notices and information.

MAILING ADDRESS:_____

CITY:_____ STATE_____ ZIP_____

PHONE:_____

It is sometimes important for us to reach someone in an emergency, for example if you suffer a medical emergency or if there is damage to you unit when you are not in residence, such as in a hurricane. We therefore need information regarding who should be contacted should w e be unable to reach you personally.

EMERGENCY CONTACT:_____

RELATIONSHIP_____

ADDRESS:_____

CITY:_____ STATE:_____ ZIP_____

PHONE: (_____)_____

All information provided will be held in the strictest confidence by the Board of Directors of Sandalfoot South One, Inc., and its management company.

Sandalfoot South One, Inc.

c/o Benchmark Property Management, Inc.

APPLICATION ESSENTIALS

Benchmark Property Management, Inc. coordinates the application process for the transfer of units by sale or lease on behalf of our client associations. In performing this service, we have too often noted that unit owners, prospective buyers or tenants, and real estate agents, title companies, mortgage brokers, etc. lack an understanding of the association's obligations and rights and the role that Benchmark plays in the process. This notice is intended to provide you with an overview of the application and approval/denial process. If you adhere to the following guidelines the process will be completed in the most timely and efficient manner possible.

1. Please remember that the association's rights and obligations are set forth in their governing documents. Both the Board of Directors and Benchmark are required to abide by those requirements.

2. Benchmark is an agent of the association and acts only under the instructions of the Board of Directors. Benchmark has no decision making power.

3. The amount of time in which the association is required to act upon an application is set forth in their governing documents. Please expect the association to use the full amount of time allowed to render its decision on any application.

4. The clock does not begin to run when we receive the application, but rather, the time allowed for the process begins to run only when we have received a completed application and all of the other supplemental information that may be required including all applicable fees.

5. When we have received all of the required materials we will forward the entire application package to the Board of Directors for their review and decision.

6. The closing date of a sale or the effective date of a lease has no bearing whatsoever on the time allotted for the board to render its decision. In planning your transaction, you should expect the association to use the full amount of time allowed.

7. **PLEASE DO NOT CONTACT OUR OFFICE FOR AN UPDATE OR A REPORT ON THE STATUS OF YOUR APPLICATION**. Doing so will only slow the process. If we need to contact you, we will do so without delay. Rest assured that when the Board of Directors has made its decision it will be provided to you within the required time.

We do not provide priority processing however your full cooperation with the foregoing will expedite the process.

Benchmark Property Management, Inc.