

UNUS PROPERTY MANAGEMENT LLC
1020 Malibu Way, Homestead, Fl 33033
Offc. 786-422-1142
Email: Info@UNUSmgmt.com

VENTURA AT MALIBU BAY HOMEOWNERS' ASSOCIATION

APPLICATION CHECK LIST

OWNER/SELLER: _____ ADDRESS: _____

ITEMS TO BE RETURNED TO UNUS PROPERTY MANAGEMENT, LLC

- **FORMS:**

- **APPLICATION**
- **SCREENING**
- **REFERENCES**
- **PET REGISTRATION (PETS OVER 30 POUNDS MUST REMIT SERVICE ANIMAL CERTIFICATE AND DOCTORS LETTER)**
- **RULES AND REGULATIONS**
- **COMMUNITY STANDARDS REFERENCE BOOKLET**
- **CREDIT AND BACKGROUND REVIEW:**
- **AUTHORIZATION FORM**
- **APPLICATION FOR OCCUPANCY**

- **PAYMENTS:**

\$150.00 APPLICATION FEE DUE FOR EVERY 18 YRS AND ABOVE WHOM WILL OCCUPY THE PROPERTY. MAKE PAYABLE TO VENTURA AT MALIBU BAY IN FORM OF MONEY ORDER OR CASHIERS CHECK.
MILITARY APPLICANTS FEE WILL BE WAIVED WITH PROOF OF MILITARY ID.

- **CAPITAL CONTRIBUTION:**

\$1200.00 ESTATES AT MENDOCINO
\$1200.00 MALIBU BAY MASTER

PLEASE INCLUDE COPIES OF ID(S), SOCIAL SECURITY CARD(S), MINOR(S) BIRTH CERTIFICATES AND/OR PASSPORT, PET IMAGE(S) AND IMMUNIZATION RECORD(S), VEHICLE REGISTRATION(S) AND PROOF OF INCOME (LAST 4 PAY STUBS, OR 3 MONTHS BANK STATEMENTS, BENEFITS LETTER, ETC.)

VENTURA AT MALIBU BAY HOMEOWNERS' ASSOCIATION

Application Form

Please type or print clearly:

Date:

Applicant's Name:

Spouse

Present Address

City

State Zip Phone

Email

Owner's Name

Spouse

Address

City

State Zip Phone

Email

Address of house

Desired Date of Occupancy

Names of people who will occupy house:

Name Relationship DOB

Name Relationship DOB

Name Relationship DOB

Name Relationship DOB

Name Relationship DOB

How long have you lived at your present address? Contact:

Type of Residence? Single family Apt. Condo Co-op Other

Employment References

Employed by:

Phone

Address

City

State Zip

How long?

Position

Yearly Income

Spouse Employed by:

Phone

Address

City

State Zip

How long?

Position

Yearly Income

VVENTURA AT MALIBU BAY HOMEOWNERS' ASSOCIATION

Reference Form

Bank References

A) Bank Acct#_____ Acct Type _____C/A or S/A _____

Address_____ City _____ St _____ Zip _____

How long? _____

B) Bank Acct#_____ Acct Type _____ C/A or S/A _____

Address_____ City _____ St _____ Zip_____

How long? _____

Character References

Name_____ Phone_____

Address_____ City _____ St _____ Zip _____

Name_____ Phone_____

Address_____ City _____ St _____ Zip _____

Name_____ Phone_____

Address_____ City _____ St _____ Zip _____

Previous Rental /Ownership Reference:

Name:_____ Address:_____

Email:_____ Phone:_____

Name:_____ Address:_____

Email:_____ Phone:_____

Name:_____ Address:_____

Email:_____ Phone:_____

VENTURA AT MALIBU BAY HOMEOWNERS' ASSOCIATION

Please list below every person who will be permanent occupant of:
Property Address: _____
You must provide all of the required information. You must also provide independent photographic evidence (such as driver's license or current passport) for each permanent occupant of the house.

Occupant Name	Age	Type of ID	Date of Birth	Relationship
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____
5	_____	_____	_____	_____
6	_____	_____	_____	_____

_____ Printed name:	_____ Printed name:
_____	_____

Please list all vehicles that will be parked in the driveway:
Make / Model / Color / Year

_____	Truck__ Van__ SUV__ Sedan__
_____	Truck__ Van__ SUV__ Sedan__
_____	Truck__ Van__ SUV__ Sedan__

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APPLICATION FOR OCCUPANCY

READ FIRST: Complete all questions and fill in all blanks. All information supplied is subject to verification. If any question is not answered/left blank, or answered falsely, this application may be returned, not processed, and/or not approved. Missing information will cause delays. Once submitted, the application can be canceled but your fee will not be refunded.

**** THIS APPLICATION IS FOR EACH INDIVIDUAL OVER THE AGE OF 18 ****

Association Name: **VENTURA**

Address applied for: _____
Full Name: _____ Date of Birth _____
Social Security #: _____ Other legal or maiden name (s) _____

Circle One: Single - Married - Separated - Divorced - How Long? _____
Have you ever been convicted of a crime? _____ If so, Date (s) _____, _____, _____
County/State Convicted in _____ Charge (s) _____
Applicant's Cell Number(s): _____ Applicant's Email Address: _____

Spouse full name: _____ Date of Birth _____
Social Security#: _____ Other legal or maiden name (S) _____
Circle One: Single - Married - Separated - Divorced - How Long? _____
Have you ever been convicted of a crime? _____ If so, Date (s) _____, _____, _____
County/State Convicted in _____ Charge (s) _____
Spouse's Cell Number(s) _____ Spouse's Email Address: _____

No. of people who will occupy unit _____ No. of Adults (over age 18) _____
Description, weight and breed of Pets: _____
Names and ages of others who will occupy unit under the age of 18: _____
In case of emergency contact name(s): _____
Relation: _____ Address _____ Phone _____

PART I – RESIDENCE HISTORY

1. Present address _____ Phone _____
(Include unit/apt number, city, state and zip code)
Apt. or Condo Name _____ Phone _____
Dates of Residency: From _____ to _____
Circle one: Own Home – Live with Parent/Family Member - Rented - Other _____
Rent/Mtg Amount _____ Are you on the Deed? ____ If yes, under what name? _____
Are you on the Lease? ____ If not, who is the leaseholder? _____
Name of landlord _____ Phone _____ Email address _____
Circle one: Is your landlord the: Owner of the property - Realtor - Family Member - Roommate -
Property Manager - Other _____

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2. Previous address _____ Phone _____
(Include unit/apt number, city, state and zip code)
Apt. or Condo Name _____ Phone _____
Dates of Residency: From _____ to _____ Circle one: Own Home – Live with
Parent/Family Member - Rented - Other _____ Rent/Mtg Amount _____
Are you on the Deed? _____ If yes, under what name? _____
Are you on the Lease? _____ If not, who is the leaseholder? _____
Name of landlord _____ Phone _____
Email address _____
Circle one: Is your landlord the: Owner of the property - Realtor - Family Member - Roommate -
Property Manager - Other _____
3. Previous address _____ Phone _____
(Include unit/apt number, city, state and zip code)
Apt. or Condo Name _____ Phone _____
Dates of Residency: From _____ to _____ Circle one: Own Home – Live with
Parent/Family Member - Rented - Other _____ Rent/Mtg Amount _____
Are you on the Deed? _____ If yes, under what name? _____
Are you on the Lease? _____ If not, who is the leaseholder? _____
Name of landlord _____ Phone _____
Email address _____
Circle one: Is your landlord the: Owner of the property - Realtor - Family Member - Roommate -
Property Manager - Other _____

PART II – EMPLOYMENT REFERENCES

Include a recent copy of an earnings statement to expedite processing

- A. Employed by _____
Phone _____ Dates of Employment: From: _____ To: _____
Position _____ Monthly Gross Income _____
Address _____
- B. Spouse Employed by _____
Phone _____ Dates of Employment: From: _____ To: _____
Position _____ Monthly Gross Income _____
Address _____

PART III – BANK REFERENCES

Include a recent copy of a bank statement to expedite processing

- A. Bank Name _____ Checking Acct. # _____
Phone _____ Address _____
- B. Bank Name _____ Savings Acct. # _____
Phone _____ Address _____

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PART IV – CHARACTER REFERENCES (No Family Members)

1. Name _____ Phone _____
 Address _____ Business Phone _____
 Email address _____
2. Name _____ Phone _____
 Address _____ Business Phone _____
 Email address _____
3. Name _____ Phone _____
 Address _____ Business Phone _____
 Email address _____
4. Name _____ Phone _____
 Address _____ Business Phone _____
 Email address _____

Are you using a realtor? Yes _____ No _____ If yes: Realtor's name _____
Email Address _____ Phone _____
Driver's License Number (Primary Applicant). _____ State Issued _____
Driver's License Number (Spouse / Secondary Applicant) _____ State Issued _____

Vehicles:

Make _____ Model _____ Color _____ Year _____ Tag No. _____
Make _____ Model _____ Color _____ Year _____ Tag No. _____
Make _____ Model _____ Color _____ Year _____ Tag No. _____

If this application is not legible or is not completely and accurately filled out, **UNUS Property Management, LLC** (and the Association) will not be liable or responsible for any inaccurate information in the investigation and related report (to the Association) caused by such omissions or illegibility.

By signing the applicant recognizes that the Association and **UNUS Property Management, LLC** will investigate the information supplied by the applicant, and a full disclosure of pertinent facts will be made to the Association. The investigation may be made of the applicant's character, general reputation, personal characteristics, credit standing, police arrest record and mode of living as applicable. This form is for the exclusive use of **UNUS Property Management, LLC**

Applicant's Signature _____ Date _____

Spouse's Signature _____ Date _____

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VENTURA AT MALIBU BAY HOMEOWNERS' ASSOCIATION

This is to certify that I have received a copy of the Rules and Regulations for Ventura at Malibu Bay Homeowners Association, along with the Community standards for the property located at:

Property Address

Name

Signature

Date

VENTURA AT MALIBU BAY HOMEOWNERS' ASSOCIATION PET REGISTRATION FORM

Resident Information:

- Name: _____
- Address: _____
- Phone Number: _____
- Email: _____

Pet Information:

- | | |
|-----------------------------------|-----------------------------------|
| • Pet's Name: _____ | • Pet's Name: _____ |
| • Species: _____ | • Species: _____ |
| • Breed: _____ | • Breed: _____ |
| • Color/Markings: _____ | • Color/Markings: _____ |
| • Age: _____ | • Age: _____ |
| • Weight: _____ | • Weight: _____ |
| • Sex: _____ | • Sex: _____ |
| • Spayed/Neutered: [] Yes [] No | • Spayed/Neutered: [] Yes [] No |

Vaccination Records:

- | | |
|--|--|
| • Rabies Certificate: [] Attached [] On File | • Rabies Certificate: [] Attached [] On File |
| • Other Vaccinations: [] Attached [] On File | • Other Vaccinations: [] Attached [] On File |

Emergency Contact:

- Name: _____
- Phone Number: _____

Please ensure to attach image of pet(s), current vaccination record(s), pets over 30lbs required service animal Certificate and Doctor's letter.

Pet Rules Acknowledgment:

I, the undersigned resident, acknowledge that I have received, read, and understand the **Vventura at Malibu Bay homeowners' Association** pet-related rules and regulations. I agree to abide by these rules, and I understand that any violations may result in penalties or revocation of pet privileges.

Signature: _____

Date: _____



Notice to Residents: Pets

According to the Association's Documents under

Section 14.2 Animals:

14.2 Animals. No animals of any kind shall be raised, bred or kept within Ventura at Malibu Bay for commercial purposes. Otherwise, Owners may keep domestic pets as permitted by Miami-Dade County ordinances up to a limit of two (2) such pets and otherwise in accordance with the Rules and Regulations established by the Board from time to time. Notwithstanding the foregoing, pets may be kept or harbored in a Home only so long as such pets or animals do not constitute a nuisance. A determination by the Board that an animal or pet kept or harbored in a Home is a nuisance shall be conclusive and binding on all parties. All pets shall be walked on a leash. No pet shall be permitted outside a Home unless such pet is kept on a leash or within an enclosed portion of the yard of a Home, as approved by the ACC. No pet or animal shall be "tied out" on the exterior of the Home or in the Common Areas, or left unattended in a yard or on a balcony, porch, or patio. No dog runs or enclosures shall be permitted on any Home. When notice of removal of any pet is given by the Board, the pet shall be removed within forty-eight (48) hours of the giving of the notice. All pets shall defecate only in the "pet walking" areas within Ventura at Malibu Bay designated for such purpose, if any, or on that Owner's Home. The person walking the pet or the Owner shall clean up all matter created by the pet. Each Owner shall be responsible for the activities of its pet. Notwithstanding anything to the contrary, seeing eye dogs shall not be governed by the restrictions contained in this Section.

- Unit shall be allowed to house only two (2) dogs or to (2) cats so long as the dog or cat weighs thirty (30) pounds or less when full grown.
- Each unit may also house domestic birds or fish. No other type of pet shall be permitted in any Unit or on the Common Elements.
- Pets shall be kept within a Unit and not be permitted on any portion of the Condominium Property except when adequately secured and restrained by a leash, where applicable and all such pets shall be walked in such areas designated by the Association so as to control the deposit of animal waste on the Condominium Property.
- No guests or invitee of an Owner shall be permitted to bring animals of any kind on the Condominium Property.
- No animals shall be allowed to commit a nuisance in any public portion of the Condominium Property.
- The term "pet" shall be limited to a dog, cat, fish or small domestic birds.
- Dogs may not be kept in Limited Common Elements when the Owner is not in the Unit.
- Each Unit Owner owning a pet shall assume full responsibility for personal injuries or property damage caused by his pet and each Unit Owner hereby agrees to indemnify the Association and all other Unit Owners and hold them harmless against any loss, claim or liability of any kind whatsoever arising from or growing out of any harm, injury, or damage caused by such Unit Owner's pet.

Please abide by the rules and regulations as violations will be strictly enforced*