

**ONE TEQUESTA POINT CONDOMINIUM ASSOCIATION
UNIT PURCHASE AND/OR LEASE
INFORMATION & INSTRUCTIONS**

The following information and documentation will be required:

1. A copy of an executed purchase agreement and/or lease. The contract must be under the name of the person(s) or entity that is to be named in the certificate of approval.
2. The One Tequesta Point application to purchase and/or lease (fully complete). Application for occupancy must list two personal references on the application (name, address & telephone numbers).
3. A non-refundable check (made payable to One Tequesta Point Condominium Association) in the amount *of One Hundred Dollars (\$150.00) for each applicant (other than a husband/wife or parent/child, in which case such combination shall be considered as one applicant)*. All persons that will be residing in a unit must go through the screening process including a background check.
4. If purchaser or lessee is a non-US Citizen or if no information is available to the screening agency, they must provide:
 - a. *Copy of passports, visas or drivers licenses*
 - b. *Proof of income and reference letter (in the form of a letter on company letterhead) from the employer and a reference letter from local bank, including non-USA bank.*
 - c. *Two personal reference letters.*
5. Leases: A Security deposit check in the amount of one month rent payable to One Tequesta Point condo Association must be provided with the application.
6. **Move Out Fees** - There is a \$500 common area refundable security deposit for move outs.
7. A fully executed and complete addendum to lease must be signed by Owner/ Lessee.
8. If unit is to be transferred to a corporation – additional forms are needed. Corporate affidavit, Articles of Incorporation, certified financial statements or tax returns for the past 3 years of corporation or president. A letter stating the officers of the corporation and who will reside in the unit and who has voting rights in all matters.
9. **Renters are not permitted to have pets.**

One Tequesta Point Condominium, 888 Brickell Key Dr., Miami, FL 33131

Telephone 305-358-8850 Fax 305-358-8843

Revised 3/17/2023

ONE TEQUESTA POINT CONDOMINIUM ASSOCIATION

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10. Once the application is approved an orientation needs to be scheduled with the management office.
An orientation will be required of all persons who will own or occupy the Unit by the management office and/or representatives from the Board of Directors. Every person will be treated equally, without regarding to race, color, religion, national origin, ancestry, sex, age, marital status, number or presence of children, sexual orientation, or physical or mental handicaps. The Association's decision in connection with any approval is final and the Association will not be required to give any explanation for its decisions or action.
11. Notices of intent to renew or extend the lease must be submitted 30 days prior the expiration of the current lease. Renewal and extension are subject to re-approval by the Board of directors.
 1. In order to renew the lease renters will need to have had abided by the restrictions and rules of One Tequesta Point.
12. All moves and deliveries must be scheduled with the management office 305-358-8850.
13. Any person owning or occupying a unit agrees to abide by the restrictions and rules and regulations of One Tequesta Point and is required to sign documentation to affirm and abide by the restrictions contained in the Condominium Documents and Rules and Regulations.
14. Complete applications and other documentation as set forth above must be submitted to the Association at least 15 business days prior to the date to the commencement of the lease and 10 days prior to the day of the interview with a Board Member.
15. No one may occupy a unit as an owner or renter unless and until the application is approved. Occupying a unit in advance of approval may be grounds for denial of an application.
16. No application will be processed if any requirements are missing or incomplete.
17. Unit purchases – No unit shall be leased during the first twelve (12) months after the transfer of title to all or any portion of a unit or the sale of all or any portion of any corporation which owns an interest in any unit.

ONE TEQUESTA POINT CONDOMINIUM ASSOCIATION, INC.

APPLICATION FOR SALE, TRANSFER OR LEASE OF UNIT

To: The Board of Directors
One Tequesta Point Condominium Assoc. Inc.

Date: _____

Re: Unit # _____

The undersigned submits this application for approval of the Board of Administration to acquire title or possession of the above Unit in One Tequesta Point Condominium, and states that the following information is true and correct (any intentional misrepresentations shall be a basis for automatic disapproval):

1. NAME OF PROPOSED OWNERS/LESSEES:

2. PERMANENT ADDRESS (After Acquisition):

3. NAMES AND AGES OF ALL PROPOSED OCCUPANTS OF UNITS:

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

4. TYPE AND NUMBER OF MOTOR VEHICLES: _____

5. CURRENT OWNER: _____

6. Pets (Owners Only) _____

The undersigned agrees to provide any further information that may be reasonably requested by the Board. The undersigned has received a copy of the Declaration of Condominium and exhibits and understand that its covenants impose responsibilities and restriction on each owner at ONE TEQUESTA POINT CONDOMINIUM.

Print Name

Signature of Applicant

Current Address

Telephone Number

Email Address

RESIDENT INFORMATION

Last Name										First Name										Birth Date										Driver's License Number																																																	
Single					Married																																																																										
Separated					Divorced																																																																										
Martial Status										Spouse's Name										Birth Date										Driver's License Number																																																	
Adults					Children																																																																										
Total Occupants										Children's Names and Ages																																																																					
Domestic Employee Name										Address										Telephone										Schedule																																																	
Domestic Employee Name										Address										Telephone										Schedule																																																	
Resident History - Past 3 Years																																																																															
																																								Own										Rent																													
Present Address										City										State										Zip Code										How Long										Telephone																													
Name and Address of Present Landlord/Mortgage Company																																								Telephone										Monthly Payment																													
Present Address										City										State										Zip Code										How Long										Telephone										Own										Rent									
Name and Address of Present Landlord/Mortgage Company																																								Telephone										Monthly Payment																													
Present Address										City										State										Zip Code										How Long										Telephone										Own										Rent									
Name and Address of Present Landlord/Mortgage Company																																								Telephone										Monthly Payment																													
Present Address										City										State										Zip Code										How Long										Telephone										Own										Rent									
Name and Address of Present Landlord/Mortgage Company																																								Telephone										Monthly Payment																													
Employment History - Past 3 Years																																																																															
Present Employer																				Supervisor										Position										How Long?																																							
Employer Address										City										State										Zip Code										Telephone										\$										per																			
Previous Employer																				Supervisor										Position										How Long?																																							
Employer Address										City										State										Zip Code										Telephone										\$										per																			
Spouse's Present Employer																				Supervisor										Position										How Long?																																							
Employer Address										City										State										Zip Code										Telephone										\$										per																			
Bank References																																																																															
Name of Bank/Savings & Loan																																								Address										City										State										Zip Code									
Name of Bank/Savings & Loan																																								Address										City										State										Zip Code									
Name of Bank/Savings & Loan																																								Address										City										State										Zip Code									

Credit / Loan References

Automobile Loans

			\$
Automobile #1, Year, Make, Model	Finance Company		Monthly Payment
			\$
Automobile #2, Year, Make, Model	Finance Company		Monthly Payment
Loans/Charge Account (including Credit Cards, Department Stores, etc.)			
Creditor	Address		Monthly Payment

Have you ever been evicted from a rental residence for nonpayment of rent? (If yes, provide info below) Yes ☐ No ☐

Landlord/Management Company Name	Address	Telephone

Vehicle Information

Vehicle #1 Year	Make	Model	Color	License Plate/Tag #	State
Vehicle #1 Year	Make	Model	Color	License Plate/Tag #	State
Vehicle #1 Year	Make	Model	Color	License Plate/Tag #	State

Personal References

In Case of Emergency Notify	Relationship	Address	Telephone
Nearest Relative Not Living With You	Relationship	Address	Telephone
Nearest Relative Not Living With You	Relationship	Address	Telephone

CORRECT INFORMATION: Applicant represents that all of the above statements are true and complete and hereby authorizes verification of the above information, references and credit records. In addition to the foregoing, applicant(s) has paid to ONE TEQUESTA POINT CONDOMINIUM ASSOCIATION herewith the sum of \$100.00 as a non-refundable fee of Association's cost and expenses in checking and verifying applicant's information and credit. Applicant acknowledges that false information hereon may constitute grounds for rejection of this application, termination of right of occupancy and/or forfeiture of deposits and may constitute a criminal offense under laws of the State.

Applicant's Signature	Date	Applicant's Signature	Date

Office Use Only Document Checklist

SALES ☐ Legible copy of sales contract ☐ Application to Sell or Rent ☐ \$150 Screening Fee (Checks only) ☐ Completed Buyer's Application ☐ Copy of Passport (if buyer is non-citizen) ☐ Verifiable Income (if buyer is non-citizen)	RENTALS ☐ Legible copy of full executed lease ☐ Application to Sell or Rent ☐ \$150 Screening Fee (Checks only) ☐ Completed Renter's Application ☐ Copy of Passport (if renter is non-citizen) ☐ Verifiable Income (if renter is non-citizen) ☐ Fully executed Addendum to Lease ☐ Common area deposit check equal to one month's rent
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RELEASE
Designated Party: Professional Screening Services

I hereby authorize your company or any agent of your company, to contact any of my references, previous employers, companies, credit bureaus, corporations, law enforcement agencies, persons and educational institutions to supply any information concerning my background. I also hereby release any of the above from any liability and responsibility arising from their doing so. This research may be performed for information dating back for the past ten (10) years. Applicant acknowledges that false information herein may constitute grounds for rejection of this application, termination of right of occupancy and/or forfeiture of deposits and may constitute a criminal offense under the laws of this state. I believe to the best of my knowledge that all information I have provided is accurate and that I fully understand the terms of this release.

Photocopies of this authorization may be made facilitate multiple inquiries. In the event you do receive a photocopy of this authorization, it should be treated as an original and the requested information should be released to facilitate my/your application for residency.

Applicant's Signature

Date

Applicant's Printed Name

Date of Birth

Applicant's Address

Social Security Number

Co-Applicant's Signature

Date of Birth

Co-Applicant's Printed Name

Social Security Number

Co-Applicant's Address



ONE TEQUESTA POINT CONDOMINIUM ASSOCIATION
(*"The Association"*)

**NOTICE WITH RESPECT TO COMMON
ELEMENT SECURITY DEPOSIT**

This shall acknowledge receipt of your common element security deposit in connection with your lease of Unit _____ in **One Tequesta Point Condominium** in the amount of \$ _____. The deposit is being held in a non-interest bearing security deposit account separate from other funds on the Association with **BB&T Bank** located at the following address: **1200 Brickell Avenue, Miami, Florida 33131.**

Attached hereto you will find a copy of relevant statutory provisions regarding the deposit which are being provided to you as required by Section 83.49(2) of the Florida Landlord and Tenant Act.

One Tequesta Point Condominium Association, Inc.

By: _____

Title: _____

Date: _____

Chapter 83

LANDLORD AND TENANT

83.49 Deposit money or advance rent; duty of landlord and tenant.--

(3)(a) Upon the vacating of the premises for termination of the lease, if the landlord does not intend to impose a claim on the security deposit, the landlord shall have 15 days to return the security deposit together with interest if otherwise required, or the landlord shall have 30 days to give the tenant written notice by certified mail to the tenant's last known mailing address of his or her intention to impose a claim on the deposit and the reason for imposing the claim. The notice shall contain a statement in substantially the following form:

This is a notice of my intention to impose a claim for damages in the amount of _____ upon your security deposit, due to _____. It is sent to you as required by s. 83.49(3), Florida Statutes. You are hereby notified that you must object in writing to this deduction from your security deposit within 15 days from the time you receive this notice or I will be authorized to deduct my claim from your security deposit. Your objection must be sent to:

**One Tequesta Point Condominium Association, Inc.
888 Brickell Key Dr.
Miami, FL 33131**

If the landlord fails to give the required notice within the 30-day period, he or she forfeits the right to impose a claim upon the security deposit.

(b) Unless the tenant objects to the imposition of the landlord's claim or the amount thereof within 15 days after receipt of the landlord's notice of intention to impose a claim, the landlord may then deduct the amount of his or her claim and shall remit the balance of the deposit to the tenant within 30 days after the date of the notice of intention to impose a claim for damages.

(c) If either party institutes an action in a court of competent jurisdiction to adjudicate the party's right to the security deposit, the prevailing party is entitled to receive his or her court costs plus a reasonable fee for his or her attorney. The court shall advance the cause on the calendar.



Date: _____

Return of Security Deposit

This letter concerns your lease agreement, dated _____ in which you leased the apartment # _____ located at One Tequesta Point Condominium, 888 Brickell Key Dr., Miami, FL 33131.

You (the Unit Owner or an Agent) paid a security deposit which was included with the rental application in the amount of \$ _____.

Please fill in the information below so that the Association may mail your security deposit to you in a timely manner. If you, the tenant, did not write the security deposit from your bank account or in your name to One Tequesta Point you must contact the person who issued the security deposit for you. The person who gave the security deposit will have to contact us in writing in order for the Association to return the security deposit to them.

Note that all security deposit checks will only be returned to the person whose name appears on the check at the time the deposit was issued to the Association.

Name: _____

Return Address: _____

Signature: _____

Print Name: _____

Checks are returned via Certified Return Receipt.