BRICKELL VIEW WEST CONDOMINIUM ASSOCIATION

Request for Approval of Lease / Rent / Resident

The following information must be submitted to the Board of Directors for consideration BEFORE APPROVAL IS GRANTED for the lease / rental of your unit:

1. **A $100.00 non-refundable application fee per applicant in a form of a money order or cashier's check only, made payable to: BRICKELL VIEW WEST CONDO ASSOC. Note: Married couples are considered as one and only a fee of $100.00 is required. Proof of marriage certificate must be provided.**
2. **A maximum of two (2) occupants per bedroom.**
3. **A copy of the lease agreement / contract must be provided.**
4. **For Lease / Rental applications: A separate $500.00 Security Deposit in the form of a money order or cashier check only made payable to: BRICKELL VIEW WEST CONDO ASSOC. The security deposit is refundable once the property is vacated and there are no damages on/in the common area(s) of the association (i.e. all property entrances, elevators, hallways, stairwells, etc.), and will be kept in an escrow non-interest bearing account.**
5. **All applicants over the age of 18 must be screened.**
6. **All applicants over the age of 18 must provide a copy of a valid government issued identification (i.e. Driver's License, Passport, etc.).**
7. **All applicants over the age of 18 must provide proof / source of income (i.e. paystubs, bank statements, etc.)**
8. **Applications along with the above requested information must be HAND-DELIVERED.**

VERY IMPORTANT

- **Brickell View West has a strict NO PET POLICY; this is non-negotiable.**
- **Rules and Regulations Acknowledgment Form must be signed at the time of the interview by all of the adult tenants that will reside on the property.**
- **A maximum of two (2) occupants per bedroom.**
- **The maximum of cars permitted on the property is the number of the parking spaces assigned to the unit.**
- **No commercial vehicles will be allowed to park on the property.**
- **Incomplete application will not be accepted for processing. Please do not leave spaces blank.**
- **Applications must be submitted to the Association no less than thirty (30) days before the expected move in/closing date.**
- **MOVE-INS & MOVE-OUTS: Monday through Friday from 9:00 am to 3:00 PM ONLY. Must submit request to: Samantha.Ortega@fsresidential.com. Occupancy prior to Approval is prohibited. If using a moving company, then a certificate of insurance from the company would need to be provided to the management office and the Association should be listed as certificate holder. In the case of a self-move, then you would need to submit a letter stating that you will be fully responsible of any damages.**

PLEASE DO NOT CALL THE CONDOMINIUM OFFICE TO RUSH THIS APPLICATION. WE LEGALLY HAVE THIRTY (30) WORKING DAYS TO COMPLETE PROCESSING.

***PLEASE BRING EVERYTHING COMPLETE; NO E-MAILS WILL BE ACCEPTED OR COPIES WILL BE MADE.**

_____

Sign acknowledgement of the terms of this application **Date**

BRICKELL VIEW WEST CONDOMINIUM ASSOCIATION

Today's Date: _____

Unit address being leased: 1723 SW 2nd Ave Unit #_____

Lease term: _____ to: _____ Expected Move-In Date _____

When approval is ready please call: _____

Name of current owner: _____ Phone: _____

Name of realtor: _____ Phone: _____

☐ Add Tenant to Existing Unit (If yes, entire application must be filled out and completed).

Applicant's / Co-Applicant's Personal Information

Applicant: Last_____ First_____ MI_____

DOB_____ SSN_____ DL#_____ State_____

E-mail address _____ Phone number _____

Language preferred : _____

Co-Applicant: Last_____ First_____ MI_____

DOB_____ SSN_____ DL#_____ State_____

E-mail address _____ Phone number _____

Language preferred : _____

Name of anyone else not listed above who will occupy your unit. If occupant is 18 years of age or older, they must submit pages 3 & 4 completed as well and will receive a background check.

Name: _____ DOB_____ SS#_____

Name: _____ DOB_____ SS#_____

Name: _____ DOB_____ SS#_____

Automobiles:

Make: _____ Model: _____ Year:_____ Color: _____ Tag# _____ State:_____

Make: _____ Model: _____ Year:_____ Color: _____ Tag# _____ State:_____

BRICKELL VIEW WEST CONDOMINIUM ASSOCIATION

Applicant's Employement Information

Present Employer: _____

Employed From: _____ to: _____ Monthly income: _____

Address: _____ City: _____ State: _____ Zip: _____

Person to contact: _____ Position: _____ Phone #: _____

Previous Employer: _____

Employed From: _____ to: _____ Monthly income: _____

Address: _____ City: _____ State: _____ Zip: _____

Person to contact: _____ Position: _____ Phone #: _____

Co- Applicant's Employment Information

Present Employer: _____

Employed From: _____ to: _____ Monthly income: _____

Address: _____ City: _____ State: _____ Zip: _____

Person to contact: _____ Position: _____ Phone #: _____

Previous Employer: _____

Employed From: _____ to: _____ Monthly income: _____

Address: _____ City: _____ State: _____ Zip: _____

Person to contact: _____ Position: _____ Phone #: _____

Applicant's / Co-Applicant's Bank / Financial - Information

Name of Bank: _____ Phone: _____

Branch Location: _____ Type: ☐ Checking ☐ Savings

Name of Bank: _____ Phone: _____

Branch Location: _____ Type: ☐ Checking ☐ Savings

Name of Bank: _____ Phone: _____

Branch Location: _____ Type: ☐ Checking ☐ Savings

BRICKELL VIEW WEST CONDOMINIUM ASSOCIATION

Applicant's / Co-Applicant's Residency History

Applicant's present address: _____ How Long: _____ Owned: ☐ Yes ☐ No

City: _____ State:_____ Zip Code: _____ Reason for Vacating:_____

Name and phone number of landlord (if applicable) _____

Applicant's previous address: _____ How Long: _____ Owned: ☐ Yes ☐ No

City: _____ State:_____ Zip Code: _____ Reason for Vacating:_____

Name and phone number of landlord (if applicable) _____

Co-Applicant's present address: _____ How Long: _____ Owned: ☐ Yes ☐ No

City: _____ State:_____ Zip Code: _____ Reason for Vacating:_____

Name and phone number of landlord (if applicable) _____

Co-Applicant's previous address: _____ How Long: _____ Owned: ☐ Yes ☐ No

City: _____ State:_____ Zip Code: _____ Reason for Vacating:_____

Name and phone number of landlord (if applicable) _____

Applicant's / Co-Applicant's Personal References

Full Name:_____ Relationship:_____

E-Mail:_____ Phone:_____

Full Name:_____ Relationship:_____

E-Mail:_____ Phone:_____

Full Name:_____ Relationship:_____

E-Mail:_____ Phone:_____

Applicant's / Co-Applicant's Emergency Contact

Full Name:_____ Relationship:_____

Address:_____ Phone:_____

Full Name:_____ Relationship:_____

Address:_____ Phone:_____

I/We, _____, do hereby swear and certify that all of the information provided herein is correct and accurate and understand that otherwise, it may cause a delay in processing which may result in denial of tenancy.

I/We, _____, absolve and hereby waives any claim and releases from liability **BRICKELL VIEW WEST CONDOMINIUM ASSOCIATION, INC.** from any wrongdoing in the process of this application and give them my full permission to do a background check, reference check, and credit check and may use any means that they see fit to obtain all necessary information. I/We also agree to furnish additional credit and/or personal references upon request. Shall this information be false I/We, _____, will not attempt to deface or embellish **BRICKELL VIEW WEST CONDOMINIUM ASSOCIATION** for their acquisition of said information.

BRICKELL VIEW WEST CONDOMINIUM ASSOCIATION is under the obligation to its client to do a full criminal investigation when asked. Please answer the following:

Applicant:
Have you been convicted of a felony? ☐ Yes ☐ No Have you been convicted of a misdemeanor? ☐ Yes ☐ No

Co-Applicant:
Have you been convicted of a felony? ☐ Yes ☐ No Have you been convicted of a misdemeanor? ☐ Yes ☐ No

If you answered yes, please briefly explain:

_____

_____

_____

Applicant has represented all information accurately and has not used an alias on this application. Applicant has read and understands that Brickell View West Condominium Association, Inc. will be performing all tasks associated with background investigations including but not limited to: Reference check, employment check, residence history, criminal history, credit history which will be completed by Global Screening. Authorization is hereby given to release banking, credit, residence, and other information pertaining to this application.

_____ _____

Applicant's Signature Co-Applicant's Signature

MAINTENANCE ASSESSMENT CONFIRMATION FOR LEASES

Owner must keep his account current with the Association for all assessments, special assessments, late charges, violations, attorney fees and costs. It is a condition of the approved lease, or any renewals, modifications, or sub-leases thereof, that the Tenant will commence paying his rent (as same comes due) to the Association as directed upon notice from Association or its attorney of Owner's delinquency and the amount thereof. After notice, the Tenant will continue to pay his rent to the Association until directed to cease. If the Association receives more funds than needed to bring the account current, any surplus will be credited to the account of the Owner.

If the Tenant fails to pay rent to the Association as directed for the Owner's delinquency account, Owner and Tenant understand and agree this shall be treated as if the Tenant failed to pay rent to the Owner. In this event, Owner and Tenant designate the Association to be the landlord under the lease and the Association may proceed with eviction of the Tenant. The Association shall comply with the Florida Statutes as to residential tenancies and evictions. The Association shall act as landlord through its Community Association Manager or President.

All court costs and attorney fees incurred in matters dealing with the Tenant shall be a personal obligation of the Owner. If these sums are not timely paid, they shall be added to the Owner's account with the Association and may be collected in the same manner as assessments due the Association, including through imposition of a Lien on the Owner's Unit.

TENANT OCCUPANCY CONFIRMATION

The Declaration of Covenants and Restrictions for Brickell View West Condominium Association, Inc. requires that the leasing of a home is subject to the prior written approval of the Board of Directors before tenants move in. Unauthorized tenants will be evicted at the homeowners' expense. It is the homeowners' responsibility to inform tenants of the rules and regulations of the Brickell View West Condominium Association, Inc. The Association has the right to terminate the lease if tenants do NOT comply with the Association rules and regulation.

I/We, _____, owner(s) of the property located at 1723 SW 2nd Ave Unit # _____ Miami, FL 33129, confirm that I have read the above language regarding the Maintenance Assessment Confirmation for Leases and Tenant Occupancy Confirmation and agree to abide by such as required by the Brickell View West Condominium Association, Inc.

_____ _____
Owner's Signature Owner's Signature

State of Florida)
County of Miami-Dade)

The foregoing instrument was acknowledged before me this _____ day of _____, 202_____, by _____, who is personally known to me or who has produced a valid identification (i.e. Driver's License, Passport, etc.) and who did/did not take an oath.

Notary: _____
Print Name: _____
Notary Public, State of Florida

My Commission Expires:

I/We, _____, do hereby swear and certify that I/We will be the only adult(s) occupying the unit located at 1723 SW 2nd Ave Unit # _____ Miami, FL 33129 for the duration of the one (1) year lease agreement permitted by the Association. Additionally, I shall not allow any additional person(s) to occupy the unit prior to obtaining written approval from the Board of Directors. Also, I have received a copy of the Rules and Regulations of Brickell View West Condominium Association, Inc. and agree to comply with them throughout the duration of my lease agreement.

Shall this information be false, I/We,_____ will not attempt to deface or embellish Brickell View West Condominium Association, Inc. for their acquisition of said information. I also confirm that I have read the above language regarding the Maintenance Assessment Confirmation for Leases and the Tenant Occupancy Confirmation and agree to abide by such as required by the Brickell View West Condominium Association, Inc.

_____ _____
Tenant's Signature Tenant's Signature

State of Florida)
County of Miami-Dade)

The foregoing instrument was acknowledged before me this _____ day of _____, 202_____, by _____, who is personally known to me or who has produced a valid identification (i.e. Driver's License, Passport, etc.) and who did/did not take an oath.

Notary: _____
Print Name: _____
Notary Public, State of Florida

My Commission Expires: