Building 10 of Racquet Club Apartments at Bonaventure 5 Condominium Association, Inc.
Rental Screening Application

The application process is approximately 14 business days from the date **all required documents and payments are received.**

ONE APPLICATION PER HOUSEHOLD

- Copies of each adult Driver's License. If you don't have a Driver's License, please submit a copy of your **passport** & **visa**.
- Copy of the vehicle registration & Insurance Identification card for each vehicle. **NO TRUCKS ALLOWED. Must be registered to the applicant(s).**
- Application fees are as follows: **INTERVIEW REQUIRED** – **NO SUBLEASING ALLOWED**
  - Per applicant(s) $100.00 (18 years and older) **NON-REFUNDABLE**
  - **All application fees are made payable to T&G Management Services, in a form of a money order or cashier check ONLY.**
- **If the applicant is coming from outside the United States,** the last place of residence should be the municipality/government agency that should provide a clearance letter/ form.
- A copy of the Lease Agreement must accompany your application. The lease term must be a minimum of 12 months.
- Provide a copy of the last two pay stubs for each applicant over 18 years old.
- **Security Deposit - The HOMEOWNER must furnish a $750.00 security deposit made payable to *BUILDING 10 OF RACQUET CLUB APARTMENTS.*** The security deposit can be paid with a **money order, or a cashier's check.** This deposit needs to be sent to our office **18001 Old Cutler Road Suite 476, Palmetto Bay FL 33157**.
- **All renters who submit emotional support animal paperwork will now be required to provide a $500.00 pet deposit. The check must be made payable to *Building 10 of Racquet Club Apartments*. The security deposit can be paid with a money order, or a cashier's check.**
- Three reference letters – see pg. 4 for more details.
- **BUILDING 10 RR** - MUST BE INITIAL AND SIGNED BY ALL RESIDENTS/APPLICANTS
- Please be advised that only two (2) adults per bedroom can occupy a home as outlined by the Florida Department of Housing.

The Application will only be accepted by MAIL, UPS, and FEDEX or they can be taken to our office.

Return application to 18001 Old Cutler Road Suite 476, Palmetto Bay FL 33157

Building 10 of Racquet Club Apartments at Bonaventure 5 Condominium Association, Inc.

APPLICATION FOR RENT

NEEDS TO BE COMPLETED BY THE OWNER:

Account #: _____ Property Address: _____

Name of Owner(s): _____

Owner Telephone(s) #: _____

Owner Email(s): _____

Owner Mailing Address: _____

Owner(s) Signature: _____

Tenants Realtors name: _____

Telephone #: _____ Email: _____

Tenant(S) PERSONAL INFORMATION

Name of 1st tenant: _____
(Last) (First) (Middle)

DOB: _____ Place of Birth: _____

SSN: _____ Marital Status: _____

Telephone Number(s): _____

Driver's License#: _____ State: _____

Email: _____

Present Address: _____

Acknowledgement of Rules & Regulations: _____
Signature of 1st Tenant/Resident

CONTINUANCE OF 2nd TENANT(S) PERSONAL INFORMATION

Name 2nd Tenant: _____
(Last) (First) (Middle)

DOB: _____ Place of Birth: _____

SSN: _____ Marital Status: _____

Telephone Number(s): _____

Driver's License#: _____ State: _____

Email: _____

Present Address: _____

Acknowledgement of Rules & Regulations: _____
Signature of 2nd Tenant/Resident

EMPLOYMENT INFORMATION TENANT/RESIDENT #1

Company: _____ Supervisor: _____

Address: _____

Telephone: _____Fax: _____

Position: _____ Salary: _____

EMPLOYMENT INFORMATION TENANT/RESIDENT #2

Company: _____ Supervisor: _____

Address: _____

Telephone: _____Fax: _____

Position: _____ Salary: _____

ALL OTHER OCCUPANTS INCLUDING CHILDREN

Name: _____ DOB: _____

Relationship: _____

Name: _____ DOB: _____

Relationship: _____

REFERENCES

REFERENCE #1 A recommendation letter must be provided (**MUST BE IN ENGLISH**) **CANNOT be family members.**

Name: _____

Address: _____

Telephone #: _____ Relationship: _____

Years known: _____

REFERENCE #2 A recommendation letter must be provided (**MUST BE IN ENGLISH**) **CANNOT be family members.**

Name: _____

Address: _____

Telephone #: _____ Relationship: _____

Years known: _____

REFERENCE #3 A recommendation letter must be provided (**MUST BE IN ENGLISH**) **CANNOT be family members.**

Name: _____

Address: _____

Telephone #: _____ Relationship: _____

Years known: _____

Please note, that in accordance with State Law, all vehicles must have a valid license plate (current), have valid insurance coverage and be in working, roadworthy order. Building 10 of Racquet Club Apartments at Bonaventure 5 Condominium Association, Inc. does not allow commercial vehicles of any kind to be parked on the property after dusk and as such may tow such vehicles at the owner's expense. Building 10 of Racquet Club Apartments at Bonaventure 5 Condominium Association, Inc. does not allow overnight on-street parking of vehicles on its roadways. Such violations will result in the towing of the vehicle at the owner's expense, or a fine of $100.00 per violation will be accessed against the homeowner.

Tenants Will Owe Assessments to the Association If the Homeowner Fails to Pay

Dear Renter:

Please be advised that based on recent changes to Florida State Law 720 (as it relates to homeowner associations), the association reserves the right to collect any past-due assessments not paid by the owner directly from you or the tenant. This is called the Assignment of Rent and is an automatic provision that you as the tenant must fully understand. You in turn as the tenant can deduct the amount paid to the association from your rental payment to the owner. By signing this screening application, you as the renter agree to abide by Florida State Law 720 and the automatic assignment of rents should it become necessary.

The applicant certifies that all information submitted is true and correct. Each applicant authorizes Building 10 of Racquet Club Apartments at Bonaventure 5 Condominium Association, Inc. and T & G Management Services, Inc. to conduct background research and verification, which may include but is not limited to mortgage history, employment statutes, tenancy, public records, personal character references, etc. The applicant acknowledges that providing false or misleading information is reasonable grounds for denial of this application. All applicants involved shall hold harmless The Building 10 of Racquet Club Apartments at Bonaventure 5 Condominium Association, Inc. and T&G Management Services, Inc. with regard to any information whether, disclosed, or discovered, that may arise from the completion of this application. By signing this agreement, the buyer, or renter agrees to abide by all the rules, regulations, and governing documentation about the association. **NO PETS ALLOWED**

_____ _____

Tenant #1 Signature Date

_____ _____

Tenant #2 Signature Date

Do not write below this line

For Office Use Only

Date received: _____ By: _____

Approved/Disapproved: _____ Date: _____

Comments: _____

Building 10 of Racquet Club Apartments at Bonaventure 5 Condominium Association, Inc

NO PETS ALLOWED

I DO NOT HAVE A PET AT THIS TIME

- I understand that this building does **NOT** allow any pets. I must comply with the no-pet policies as set forth below. **All renters who submit emotional support animal paperwork will now be required to provide a $500.00 pet deposit. The security deposit can be paid with a money order, or cashier's check.**

Property Address: _____

1st Tenant's name: _____

Signature: _____ Date: _____

2nd Tenant's name: _____

Signature: _____ Date: _____

If you have an emotional support pet, please complete the following requirements:

- Provide the necessary proper documentation.
- Pay a security deposit of $500.00, payable to Building 10 of Racquet Club Apartments (money order or cashier's check ONLY.
- Submit a recent picture of your pet and their current vaccination records.

1. **Tenant Name (s): _____**
2. **Tenant Phone Number (s): _____**
3. **Pet Type: _____Pet Name (s): _____**
4. **Gender: _____ Breed: _____**
5. **Age: _____ Weight: _____**
6. **Neutered/Spayed: Yes_____ No_____**
7. **Description: (Write Legibly):_____**

   _____

Building 10 Racquet Club Apartments
Tenants Vehicle Registration Form

Important Notice: EVERGREEN HOA PARKING ENFORCEMENT PROGRAM

Address: _____

We hope this message finds you well. As part of our commitment to maintaining a safe and organized community, the Board of Directors has approved Parking Enforcement with Goldgar.

We kindly remind all residents of the requirement to register **no more than 2 parking spaces per household**. Please refer to the Parking Enforcement section within the community Rules & Regulations for the full set of rules.

Vehicle Registration and Parking Permit Guidelines: To complete the registration process, please follow the steps below:

1. Go online to www.goldgarusa.com

2. Select “Resident Portal” to review your registration process.

3. Select “New Resident Registration” and scroll to select your community to begin.

☐ A copy of your car registration showing your NEW community address is required.

☐ A copy of your driver’s license showing your NEW community address is required.

☐ A copy of the lease is required if you are a tenant.

4. After submitting your registration, purchase your permits for each vehicle and a guest hanger.

5. Upon submission and payment, your vehicles will be instantly safe-listed until your application is approved, and Parking Enforcement installs decals on your vehicles.

Important Notes:

☐ If the documents provided do not match your **NEW** address, parking permits will NOT be issued.

☐ Each new decal costs $25.00, and each new guest hanger costs $35.00, which can be purchased online after completing the online registration form.

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

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

PLEASE SIGN BELOW THAT YOU ARE AWARE OF YOUR PARKING SPACE ASSIGNMENT AS WELL AS THE RULES AND REGULATIONS IN ACCORDANCE WITH PARKING IN A COMMON AREA AT PINE ISLAND RIDGE CONDOMINIUM A ASSOCIATION, INC.

1st Signature: _____ Date: _____

2nd Signature: _____ Date: _____

ONE FORM PER ADULT (18 years old or older) – PRINT THIS PAGE AS NEEDED

AUTHORIZATION REGARDING BACKGROUND INVESTIGATION

By signing below, I acknowledge receipt of the following separate documents (and certify that I have read and understood them):

- DISCLOSURE REGARDING BACKGROUND INVESTIGATION ON YOU:
- A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT:
- ADDITIONAL NOTICE REGARDING INVESTIGATIVE CONSUMER REPORTS ON YOU:
- ADDITIONAL STATE LAW NOTICES.

By signing below, I also authorize **T and G Management Services** to obtain **"consumer reports"** and **"investigative consumer reports"** about me for tenant purposes.

Signature:_____ Date:_____

_____

Print Name - First Middle Last Name

PERSONAL INFORMATION NEEDED FOR BACKGROUND CHECK

Please supply the following information to facilitate a background check on you.

Last Name: _____ First Name: _____ Middle: _____

Other Names Used (alias, maiden, nickname): _____

Social Security Number: _____ Date of Birth: _____

Driver License No.: _____ State Issued: _____

Phone Number: _____

Email Address: _____

Current Address: _____

Address City / State Zip Code Country Dates

Former Address: _____

Address City / State Zip Code Country Dates

_____

Current Employer Address City/State Start Date Salary

_____

Supervisors name Employer Telephone Number

ONE FORM PER ADULT (18 years old or older) – PRINT THIS PAGE AS NEEDED