



1600 NE 1ST AVENUE. MIAMI, FL. 33132



LEASE APPLICATION



CREDIT CARD AUTHORIZATION FORM

UNIT #: _____ Date: _____

Resident(s) Name: _____

Charge will be for (circle one)

- ☐ Pet Fee (**\$150 per pet**) nonrefundable accompanied with pet vaccination report. Documentation is required for service dog/emotional support animal for pet fees to be waived.
- ☐ Pet tags (**\$30 per pet**) must be always worn in common areas of the building. Nonrefundable.
- ☐ Application Fee (**\$150 per person or married couple-marriage certificate required in English**), nonrefundable.
- ☐ Expedited Application Fee (**\$50.00**) -non-refundable
- ☐ Association Security Deposit (**\$1000 refundable**) is only needed if unit is rented.
- ☐ Elevators Deposit (**\$1000**) Refundable.
- ☐ Key Fob (**\$30 each**) purchased through admin on move- in day. Nonrefundable/non replaceable. Not responsible for product defects, make sure your key fob is working before you leave.
- ☐ Car Sticker/Permit (**\$30 each**) purchased through admin on move- in day. Nonrefundable/non replaceable and not responsible for product defects. Make sure your car sticker is working before you leave.
- ☐ Party Reservation Deposit (**\$500**) Refundable and application must be submitted.
- ☐ Party Reservation/cleaning fee (**\$150**) Non-Refundable.
- ☐ Other \$ _____
- ☐ Violations (**\$100 per occurrence**), nonrefundable.

CREDIT CARD: PLEASE NOTE THAT THERE IS A THIRD-PARTY NON-REFUNDABLE SERVICE FEE ADDED TO THE ABOVE CHARGES.

Name on Credit Card: _____

Address Credit Card is Associated With: _____

Credit Card Number: _____

Expiration Date: _____

CVV# (Back of card): _____

AMEX# (front of the card) _____

Amount to be charged: _____

Signature of Card Holder: _____

Name on Bank Account: _____

Bank Name: _____

Routing Number: _____

Account Number _____

Amount to be charged: _____

Signature: _____



CANVAS CONDOMINIUM APPLICATION GUIDELINES

Please be advised effective immediately, the following changes have been regarding the application process:

- ❖ All lease applications must be presented in person.
- ❖ Leases will only be accepted Monday —Thursday from 11:00 am - 4:00pm in the management office, Application will be received no more than 30 days in advance.
- ❖ Incomplete applications will not be accepted or processed until all documents are provided, all documents must be signed by the prospective tenant/owner and all respective deposits, Including the Association security deposit required from owners (**credit card authorization form only**) paid to the condominium association must be received at the time the application is turned in. This deposit is a requirement for owners that can be paid by the tenant if both parties agree to be as such.
- ❖ Copy of lease agreement is required or reservation from original platform listing for short term only (**Airbnb, Vrbo, Booking etc..**).
- ❖ Copy of IDs must be in color and front and back.
All lease must be dated no less than 14 business days or 3 business days(**expedite only**) from the date they are turned in to the condominium association. Application will be received no more than 30 days in advance.
- ❖ The actual move-in date will be determined after the lease has been approved and will be provided by contacting our receiving department.
- ❖ Key Fob (**\$30 each**) purchased through admin on move- in day. Nonrefundable/non replaceable. Not responsible for product defects, make sure your key fob is working before you leave.
- ❖ Car Sticker/Permit (**\$30 each**) purchased through admin on move- in day. Nonrefundable/non replaceable and not responsible for product defects. Make sure your car sticker is working before you leave.
- ❖ A 10 Minute Tenant Orientation will be conducted on the day of the Move-In at the Management Office. Orientation applies to Long-Term leases only.
- ❖ Emergency keys are only to assist in the event of a Flood, Fire, or Death. Lock-outs must be addressed at residents' expense through a local locksmith company. Canvas Security or Office Staff are not authorized to open doors with the emergency keys for lock-out situations.
- ❖ The \$1000 refundable Move-in Elevator reservation deposit must be delivered to the Management Office Administrator before the Move -In date. Check or Credit Card. If paying with Credit the form will be shredded after 48 hours if not requesting back after the Moving.
- ❖ Tenant (s) must be present on the day of the Move-in.

Tenant Name: _____ Tenant Signature _____ Date _____

Tenant Name: _____ Tenant Signature _____ Date _____



LEASE APPLICATION CHECKLIST

ALL ITEMS MUST BE CHECKED PRIOR TO SUBMITTING TO THE MANAGEMENT OFFICE. Application will be received no more than 30-days in advance from the lease start date.

Unit Number: _____ Owner Name: _____

Tenant Name: _____

Lease Term _____ to _____ Lease Amount; \$ _____

LESSOR — Please mark Item submitted:

Application to Lense _____

Copy of lease agreement / Reservation **(short term only)** _____

Lease Addendum _____

Copy of ID (Driver License -Color -front & back) _____

Copy of ID (Passport, only IF not a US resident(International)) _____

Non-Refundable Application Processing fee (\$150,00/person or married couple)
(marriage certificate is required and translated in English)

Association Security Deposit (\$ 1000) _____

Refundable Elevator Deposit (\$1000) Provide at the time of move in _____

Pet fee of \$150 per pet, if applicable **(Documentation is required for service dog/emotional support animal for fee to be waived)**

Tenant Information Sheet _____

Anticipated Move -In Dale: _____ Time: _____

NOTICE:

Every form in this package must be completed, All Information required must be provided. Failure to provide the completed package may delay your move-in to Canvas Condominium. The completion of this package is your responsibility, please submit it as soon as possible.

Lessee Name: _____ Lessee Signature _____ Date _____

Owner Name: _____ Owner Signature _____ Date _____



LEASE APPLICATION ACKNOWLEDGMENT & AGREEMENT

To: The Board of Directors

I/We agree to provide the lessee with a copy of the Canvas Condominium Association Declaration, Bylaws, Articles of Incorporation and Rules & Regulations, prior to the occupancy Unit by lessee.

I/We will be bound by the Declaration of Condominium By-laws, Articles of Incorporation and Rules & Regulations of the Condominium Association.

The Association and its agent, in the event it consents to a lease, is hereby authorized to act as our agent with full power and authority to take such action as may be required, if necessary, to compel compliance by our lessee(s) and/or their guests, With provision of the Declaration of Condominium of Canvas Condominium Association, Inc; its supportive efforts the condominium act, and Rules and Regulations of the Association, or in the instance of violation of any of the above by the lessee(s) and/or their guests under appropriate circumstances, to terminate the leasehold, If (his application is for a lease, the lessor agrees to reimburse the Association for any attorney's fees and cost incurred as lessor agent in such enforcement or lease termination.

In order for you to facilitate consideration of my/our application for the lease of the above designate unit, I/ We have caused the proposed lessee to complete the attached Application by Proposed Lessee(s), I/We and/are aware that any falsification or misrepresentation of the facts in the attached application Will result in the automatic rejection of the Application to Lease. I/We have attached a Copy of the Lease agreement or other documents which true and accurately set forth the terms of the lease that I/We wish to accept.

I/ we understand that the Association will conduct background checks, however, it is recommended that the Unit Owner also conducts their' own background checks on their tenant(s),

I/ We agree that Lessee(s) shall not move in unless pre-Registered with the Association upon approval.

Dated: This _____ Day Of _____ 20

Unit Owner name: _____ Unit Owner Signature: _____



BROWNS BACKGROUND CHECKS
CONSENT TO OBTAIN CONSUMER REPORT ON
SUBSCRIBER Canvas Condominium Association Inc.

I understand that you may obtain consumer reports that relate to my credit and/or criminal history. This Information will, in whole or in part* be obtained from ABS, a Sterling infosystem Company, 6111 Oak Tree Blvd, 4th floor, Independence, OH 44181, telephone 800.85313228. I understand that you may be requesting Information from various federal, state, and other agencies or Institutions, which maintain public and nori „public records concerning my past activities relating to my credit and/or criminal history. This information will be reviewed by the Association and may be reviewed by a unit owner If it's a rental,

I authorize, without reservation, any party, institution, or agency contacted by AISS to furnish the Information:

Applicant Name

Date of Birth

Social Security Number
Passport Number (if International)

Co-Applicant Name

Date of Birth

Social Security Number
Passport Number (if International)

Alias/ Other Name(s)

☐ **California, Minnesota & Oklahoma Applicants Only:** Please check here to have a copy of your consumer report sent directly to you.

Notice to CALIFORNIA Applicants: Under Section 1786,22 of the California Civil Code, you have the right to request from AISS, upon proper Identification, the nature and substance of all information in its files on you, including Che sources of information, and the recipients of any reports 0b you, which AISS has previously furnished within the two-year period preceding your request. You may view the file maintained on you by AISS during normal business hours, you also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services, upon making a written request, you may receive a summary of your report via telephone.

Applicant(s) Signature

Co-Applicant(s) Signature

Date

Date



LEASE APPLICATION

Date: _____

Unit: _____

Name of Applicant(s)_____

THE FOREGOING IS TO INFORM APPLICANT(S) OF THE PROCEDURES FOR APPLICATION APPROVAL THUS APPLICANT(S) CAN PLAN ACCORDINGLY.

- 1.** Regular processing may take **up to 14 business days and up to 3 business days for expedited processing.** Be advised that application processing days may differ depending on the background check result.
- 2.** Your credit and criminal history will be requested and obtained through a third-party background agency.
- 3.** A Credit Card Application Fee will be charged during the application process. Processing fees applied by third-party.
- 4.** Your application package will be forwarded to the Association's Board of Directors for review and consideration.
- 5.** Occupancy prior to Association Approval is prohibited.
- 6.** Canvas is a **smoke-free** environment. smoking regular and/or vapor cigarettes is prohibited on any portion of the common areas of the condominium.
- 7.** Canvas is a pet friendly community (restrictions apply) and has a Zero tolerance policy for Animal Abuse.

We thank you in advance for your cooperation.

Applicant print name

Applicant Print name

Applicant print name.

Applicant Signature

Applicant Signature

Applicant Signature



APPLICANT(S) INFORMATION

**NOTE: THIS APPLICATION WILL NOT BE PROCESSED IF ALL QUESTIONS HAVE NOT BEEN ANSWERED.
ENTER N/A WHERE IT DOES NOT APPLY.**

Applicant Name

Date of Birth

Driver's License/passport

Social Security Number

Marital Status

Telephone number

Email Address

Spouse/ Co-Applicant Name

Date of Birth

Driver's License/passport.

Social Security Number

Marital Status

Telephone number

Email Address

Number of Adult Occupants

Number of Minor children

Child(s) Name and Age

Child (s) Name and Age

Child (s) Name and Age



RESIDENCE HISTORY

Current Address: _____

If own: How long? _____ if Rent: How long? _____ Monthly Rent\$ _____

Name of Present Landlord/Mortgage Lender: _____

Telephone Number: _____

APPLICANT'S EMPLOYMENT HISTORY

Applicant's Present Employer/Company	Supervisor Name	Hire Date
Employer Address	Telephone #	Position
Annual Salary	Other Income	Source
Amount		

SPOUSE / CO-APPLICANT EMPLOYMENT HISTORY

Applicant's Present Employer	Supervisor Name	Hire Date
Employer Address	Telephone	Position
Annual Salary	Other Income	Source
Amount		



EMERGENCY CONTACT INFORMATION

In case of emergency please first notify:

Name _____ email/ Telephone # _____

Secondary Person:

Name _____ email/ Telephone # _____

ACKNOWLEDGEMENT AND ACCEPTANCE OF PURCHASE APPLICATION GUIDELINES AND THE ASSOCIATION RULES & REGULATIONS WHICH HAVE BEEN ATTACHED TO THIS APPLICATION.

hereby agree on my behalf and on behalf of all persons who may use the Unit which seek to lease that we abide by all the restrictions contained in the "By Laws, Rules and Regulations, Condominium Documents and restrictions of Canvas Condominium Association, Inc,

Signature of Applicant(s): _____

Signature of Spouse/Co-Applicant/Roommate: _____

The above signature acknowledges that the Association, or Agent assigned by the Association, may investigate the information provided by the above signed and agrees that a full disclosure of any Information mentioned herein Including residential, employment, bank Information, personal and credit related may be made to the Association.

CRIMINAL HISTORY

Has the applicant been arrested? Yes_____No_____if yes, Date_____

Reason_____

Has the co-applicant been arrested? Yes_____No_____if yes, Date_____

Reason_____



PET REGISTRATION

(maximum 2 pets/50lbs aggregate weight)

Owners are responsible for their pets and their pets' actions. Please adopt neighborly behavior and become part of the Canvas Mindful style of living by properly disposing of your pet's waste and/or notifying staff of any pet incidents to maintain our code of safety and a healthy environment. As we choose them for companionship remember to treat your pet with respect and compassion. Canvas Condominium Association has a Zero Animal Abuse tolerance policy.

Documentation is required for service dog/emotional support animal for fee to be waived.

For detailed information on Emotional Service Animals (ESA), please refer to next page of this application.

Pet Name(s): _____

Vet Clinic Telephone #: _____

Pet Type: ☐ CAT ☐ BIRD ☐ DOG ☐ OTHER

1. Name: _____ Age: _____ ☐ Check Vaccine Report **(required)**

2. Name: _____ Age: _____ ☐ Check Vaccine Report **(required)**

Weight (maximum 50lbs aggregate): _____ ☐ Check if ESA/ES License/tag# _____

Breed: _____ Color: _____ ☐ Check if Picture attached **(required)**

I hereby agree that I will not maintain more than two **(2) household pets which aggregate weight of fifty (50) pounds** in my Unit at Canvas Condominium either now or in the future.

I agree to provide a DNA sample. for each pet, which sample may be taken by swab of the Interior of such pet's mouth, The Condominium Association shall have the right to have any pet feces tested for purposes of feces in addition to any other remedy provided to the Association, and I shall be subject to a fine for failure to pick up & appropriately dispose of solid wastes of my/our pet(s),

I agree to take full responsibility for any guests of the Unit I am occupying and agree to forbid their bringing of any dogs or pets onto Canvas Condominium property.

All pets must be kept on a leash of a length that always affords reasonable control over the pet, or must be carried, when outside the Unit, Pets may only be walked in paths and areas designated for such purposes.

No pet may pass through the Lobby or front entry door, upon entering and exiting the building, the service elevators must be used to transport pets.

Signature of Applicant: _____ Date: _____

Signature of Co-Applicant: _____ Date: _____



EMOTIONAL SUPPORT ANIMAL

CANVAS CONDOMINIUM ASSOCIATION, INC.

*Re: Canvas Condominium Association, Inc. ("Association")
Emotional Support Animals and Condominium Policies*

Dear Unit Owners and Residents:

In light of recent concerns within the community, the Association would like to provide general information regarding requests for assistance animals and emotional support animals (collectively, "ESA's"), and to remind all residents of their continuing obligations under the Association's governing documents and community rules.

As background, the Association's governing documents contain various rules and policies governing animals and pets within Canvas Condominium ("Condominium"). By way of example, and without limitation, the Declaration of Condominium provides that no more than two (2) household pets may be maintained within a Residential Unit, that such pets may not exceed an aggregate weight of fifty (50) pounds, and that certain "vicious breeds" are prohibited. Many residents choose to live in the Condominium because of those rules and policies.

At the same time, federal and state fair housing laws permit individuals with disabilities to request reasonable accommodations from those restrictions, including permitting ESA's, under certain circumstances. Except for limited exceptions, a complete accommodation request generally requires the submission of reliable information reasonably supporting both the existence of a disability and the disability-related need for the particular ESA being requested.

The Association has established forms which can be used for individuals seeking such accommodations. Each request is evaluated on an individualized basis and in accordance with applicable legal requirements. An accommodation request for an ESA may be denied for various reasons, including, without limitation, the failure to provide sufficient supporting information.

Notwithstanding any approved accommodation, all individuals remain responsible for the conduct and supervision of their animals at all times, and approval of an ESA does not exempt or eliminate the individual's obligation to comply with the Association's governing documents, rules, and regulations relating to health, safety, and nuisance prevention. All animals within the Condominium (including approved ESA's) must be properly controlled and may not create a nuisance or disturbance for other residents. Examples of prohibited conduct include, but are not limited to:

- Excessive barking or noise;
- Aggressive or threatening behavior;
- Failure to clean up animal waste or dispose of it appropriately;
- Animals roaming without proper restraint;
- Damage to common elements or other property; or
- Conduct that interferes with the quiet enjoyment of the Condominium by other residents.

The Association retains the authority to enforce its governing documents and rules in the event of violations. Depending on the circumstances, enforcement actions may include warning letters, fines, suspension of use rights for common amenities, reimbursement for damages, withdrawal or revocation of previously approved accommodation, removal of the animal from the Condominium, and other remedies authorized under the governing documents and applicable law.

The Association encourages all residents to be respectful of their neighbors and to work cooperatively to maintain a safe and pleasant living environment for everyone in the Condominium.

Questions regarding accommodation requests or community rules may be directed to the Association's management office.

The Association reserves all rights under the governing documents and applicable law.



CANVAS CONDOMINIUM ASSOCIATION, INC.

Request for Reasonable Accommodation for Assistance/Emotional Support Animal only

Dear Resident/Applicant:

Canvas Condominium Association, Inc. ("Association") has strict rules and policies regarding animals and pets within the premises. For example, without limitation, the Association's Declaration of Condominium provides that "no more than two (2) household pets shall be maintained in any Residential Unit" and that "in no event shall such pets exceed an aggregate of fifty (50) pounds in weight." Many people have chosen to reside in Canvas Condominium because of those rules and policies. Under applicable Federal and State Fair Housing laws, a person who is disabled may request a reasonable accommodation in the rules, policies, practices or services from a housing provider when such accommodation is necessary to ameliorate conditions caused by the disability. You have received this package because you, or a member of your household, have requested from the Association reasonable accommodation with respect to an assistance/emotional support animal due to a disability as defined by the applicable Federal and State Fair Housing Acts. In order to request such reasonable accommodation on behalf of yourself or a member of your household, please complete this form and return it to the office of the Association's Property Manager. It is the responsibility of the Association to obtain this information in order to evaluate the requested accommodation to its policy and rules, as well as to protect the health and safety of all persons in Canvas Condominium.

Except for limited exceptions, the Association requires you to submit reliable information that reasonably supports the existence of a disability, as well as the disability-related need for the particular assistance/emotional support animal(s) being requested. Supporting documentation may include information from a health care professional as defined by the Florida Statutes who has personal knowledge of the purported disability and who is acting within the scope of his or her practice to provide the supporting information. Therefore, please review and execute the enclosed "Authorization for Release of Information," and have the "Reasonable Accommodation Request Verification" completed by your health care provider or other qualified professional.

The Association will use this information to evaluate your request for a reasonable accommodation under applicable law, and it will endeavor to keep this information confidential. However, please be aware that the information provided may be discussed and analyzed by the Association's Board of Directors, applicable committees, property managers, and legal advisers. If you choose not to provide the required information, then the Association might not be able to approve your reasonable accommodation request.

To the extent a disability is not permanent, the Association may periodically request updated information (medical or otherwise) as it deems necessary to determine if there is a continued need for the requested accommodation. Please be aware that some disabilities may be temporary and resolve in time. When that is the case, the accommodation may be withdrawn or revoked if the disability no longer exists. Additionally, because an individual's need for an accommodation may change over time as a result of changes in the individual's own level of disability or impairment, treatments and/or other circumstances affecting the individual, it is the individual's responsibility to notify the Association if a reasonable accommodation is needed or no longer needed. Please note that the accommodation may not apply to more than one animal unless the distinction of separate needs for each animal has been duly established, and unless a separate application is submitted for each. Please also note that the Association may request updated vaccination records and licenses for the animal on an annual basis, as may be applicable.

Among other reasons, a reasonable accommodation request for a support animal may be denied if such animal poses a direct threat to the safety or health of others or poses a direct threat of physical damage to the property of others. Moreover, a support animal registration of any kind, including, but not limited to, an identification card, patch, certificate or similar registration obtained from the Internet is not, by itself, sufficient information to reliably establish that a person has a disability or a disability-related need for a support animal.

If the reasonable accommodation request is granted, the Association reserves the right to withdraw or revoke the approval at any time should the animal become a nuisance to others, which includes, but is not limited

to: barking, biting, aggressive behavior, attacking, unreasonable noise or nuisance, sanitation or odor or grooming problems, damage or injury caused to persons or property, failure to maintain the animal on a controlled leash or in a crate while in the common areas, failure to properly dispose of the animal's excrement or waste, walking the animal to relieve itself in prohibited areas, allowing the animal to be present in prohibited areas, failure to provide updated medical information or vaccination records or other information as may be applicable, failure to comply with the Association's governing documents and restrictions pertaining to animals, and failure to comply with applicable laws, codes and regulations pertaining to animals.

In connection with the accommodation request, please provide the following information:

_____ Name of Applicant/Resident	_____ Name of person signing this form (if different from name of applicant)	_____ Relationship to applicant (if applicable)
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_____ Signature	_____ Today's Date	_____ Phone Number	_____ E-mail Address
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Unit Number / Address

_____ Type, Breed & Color of Animal	_____ Name of Animal	_____ Age of Animal
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_____ Current Weight & Expected Weight of Animal	_____ Date Animal Acquired
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Please state: (1) the reason(s) for requesting this reasonable accommodation; (2) the work, tasks, assistance or therapeutic support that will be performed by the animal for the individual; and (3) how such work, tasks, assistance or therapeutic support will alleviate one or more symptoms of the individual's disability:

Please also provide: (1) a color-copy photograph of the animal; (2) supporting documentation which verifies that all vaccinations, inoculations and licenses are properly up to date and comply with all applicable laws and regulations; and (3) the completed forms included with this package.

NOTE: A person who falsifies information or written documentation for an emotional support animal, or knowingly provides fraudulent information or written documentation for an emotional support animal, or otherwise knowingly and willfully misrepresents himself or herself, through his or her conduct or through a verbal or written notice, as having a disability or disability-related need for an emotional support animal or being otherwise qualified to use an emotional support animal, commits a crime which is punishable as a crime under applicable Florida law.

Authorization for Release of Information

RE: Household Member with Disability: _____

I hereby authorize _____ **[Insert name of health care provider or other qualified professional]** to release certain information to Canvas Condominium Association, Inc. in connection with a reasonable accommodation with respect to an assistance/emotional support animal. This release shall constitute a limited authorization for the release of information and documentation, as described below. Such information or documentation should only include that which is necessary to verify that I (or the household member with a disability) meet the definition of a "Qualified Individual with a Disability," as well as to verify that the requested reasonable accommodation is needed because of a disability.

This Authorization solely authorizes the release of information necessary to verify the following:

- 1. Documentation necessary to verify that the above-named individual meets the definition of a “qualified individual with a disability,” as defined below;**
- 2. A description of the needed reasonable accommodation(s); and,**
- 3. A description of the identifiable relationship between the individual’s disability and the requested reasonable accommodation(s).**

For purposes of this Release, a “Qualified Individual with a Disability” is defined as a person who has a physical or mental impairment that:

1. Substantially limits one or more major life activities;
2. Has a record of such an impairment; or
3. Is regarded as having an impairment.

The term “Physical or Mental Impairment” includes, but is not limited to, such diseases and conditions as orthopedic, visual, speech and hearing impairments, cerebral palsy, autism, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, Human Immunodeficiency Virus infection, mental retardation, emotional illness, drug addiction (other than addiction caused by current, illegal use of a controlled substance) and alcoholism.

The term “substantially limits” suggests that the limitation is “significant” or “to a large degree.”

“Major Life Activities” are those activities that are of central importance to daily life, such as seeing, hearing, walking, breathing, performing manual tasks, caring for oneself, learning, and speaking.

This Authorization does not authorize Canvas Condominium Association, Inc. to examine my medical records (or those of the household member with a disability), including diagnosis or test results; nor does this authorize the release of detailed information about the nature or severity of my disability (or of the household member with a disability). Any information or documentation released as a result of this Authorization shall be kept confidential and will not be shared with anyone unless required to make or assess a decision to grant or deny a reasonable accommodation request.

Name of Applicant/Resident

Name of person signing this form
(if different from name of applicant)

Relationship to applicant
(if applicable)

Signature

Date



CANVAS CONDOMINIUM ASSOCIATION, INC.

Reasonable Accommodation Request Verification

Name of Health Care Provider or other qualified Professional: _____

Address and Phone Number of Health Care Provider or other qualified Professional: _____

Re: Request for Reasonable Accommodation

Name of Person Requesting Accommodation (the "Applicant"): _____

Under normal circumstances, the Association's covenants, rules and regulations would require it to deny the Applicant's request. However, under applicable federal and state laws, if a disabled individual requests an accommodation due to his/her disability, the Association must consider the request. To do this, the Association must verify that the individual qualifies as disabled under applicable law and that the individual requires the accommodation to have an equal opportunity to use and enjoy his/her home.

DEFINITION OF "DISABLED"

A person is considered disabled under state and federal laws if he or she has a physical or mental impairment which substantially limits one or more of his or her major life activities, such as seeing, hearing, walking, speaking, learning, breathing, performing manual tasks, or caring for oneself; has a record of having such impairment; or is regarded as having such impairment.

The U.S. Department of Housing and Urban Development (HUD) and the Justice Department have noted that physical or mental impairments include, but are not limited to, such diseases and conditions as orthopedic, visual, speech and hearing impairments, cerebral palsy, autism, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, HIV, mental retardation, emotional illness, drug addiction (excluding an addiction caused by current, illegal use of a controlled substance) and alcoholism.

INFORMATION REQUESTED

1. Are you the Applicant's treating medical professional with personal knowledge of his/her medical condition and history?
☐ Yes ☐ No
2. Date on which you last provided care or services to the Applicant: _____
3. Is the Applicant disabled as defined above?
☐ Yes ☐ No
4. Does the Applicant's disability substantially limit one or more of his/her major life activities?
☐ Yes ☐ No
5. If yes, what "major life activities" are substantially limited by this disability?

6. Have you concluded that the Applicant needs a reasonable accommodation in order to ameliorate the Applicant's impairment? If so, what is the needed accommodation?

7. How will the Association's granting of the reasonable accommodation lessen the effect of the Applicant's disability or facilitate the Applicant's ability to function?

8. In your professional opinion, does the Applicant need the requested accommodation in order to have the same opportunity that a non-disabled individual has to use and enjoy his/her home?

[] Yes [] No

9. What particular animals(s) are you recommending that the Applicant obtain or acquire to ameliorate the Applicant's impairment? (Please include all applicable information, including, but not limited to, the name of the animal(s), type of animal(s), breed of animal(s), size of animal(s), qualities and characteristics of the animal(s), and any other pertinent information):

10. What particular assistance or therapeutic emotional support will the specific animal(s) identified above provide to the Applicant?

11. If more than one animal is medically necessary to ameliorate the Applicant's impairment(s), please explain the specific need for each separate animal:

12. **For Out-of-State Providers:** In compliance with the Florida Fair Housing Act, I certify that I have provided in-person care or services to the Applicant on at least one occasion.

_____ (Provider signature here)

Would you be willing to testify in any court action or related proceeding regarding the Applicant's need for the requested accommodation and the particular animal(s) identified above?

[☐] Yes [☐] No

I hereby certify that: (1) the statements made herein are true and correct; (2) all statements are based on my personal knowledge of the Applicant's disability and disability-related need for the animal(s); and (3) I am acting within the scope of my practice in providing the statements made herein.

Name of Health Care Provider or other qualified Professional: _____

Signature of Health Care Provider or other qualified Professional: _____

Title of Health Care Provider or other qualified Professional: _____

Firm/Organization of Health Care Provider or other qualified Professional: _____

My practice specialty is: _____

I am licensed by the State of: _____

License Number: _____

Date: _____

NOTE: A health care practitioner is subject to license suspension, fines and/or other disciplinary action if he/she provides information or written documentation indicating that a person has a disability or supporting a person's need for an emotional support animal without personal knowledge of the person's disability or disability-related need for the specific emotional support animal.



ADDENDUM TO LEASE AGREEMENT

THIS ADDENDUM, (this ____ day of 20__) is attached, and forms an integral part of the lease to which it is attached, (dated _____ for a term commencing _____ and expiring _____ (hereinafter referred to as the Lease) by and between _____ (hereinafter referred to as Owner or 'Lessor) and _____ (hereinafter referred to as lessor), for **Unit** _____ (hereinafter referred to as the Unit) of Canvas Condominium Association, located at **1600 NE 1st Avenue. Miami, FL 33132.**

In the event this Addendum conflicts with, varies or modified the term and provisions of said Lease, then in such event, the terms and provisions of (this Addendum shall control and govern the rights and obligations of the parties, WITNESSETH:

WREREAS Lessor of the unit that wishes to lease said Unit to Lessee:
_____ and

WHBREAS Canvas Condominium Association, (the Association), pursuant to the Association's Declaration of Condominium (the Declaration), has the right to approve leases of units within Canvas Condominium Association, Inc, (the Condominium) and in connection therewith the Association is requiring that the Addendum of Lease form be executed by Lessor and Lessee,

NOW, Therefore in consideration of the terms set forth herein and other good and valuable consideration, the receipt and adequacy of which the parties hereby acknowledge, the parties agree as follows:

- 1.** The foregoing recitals are true and correct and are incorporated herein by this reference,
- 2.** All capitalized terms set forth in this Addendum shall have the meaning as set forth in the Declaration unless the context otherwise provides,
- 3.** Lessee shall abide by and comply with the provisions of the Association's Declaration, BY" Laws, Articles of Incorporation, Rules, and Regulations as same may be amended from time to time (hereinafter referred to as the Governing Document and shall comply with all laws, ordinance, regulations, administrative rules applicable to the Unit including but not limited to Chapter 718 Florida Statutes, (the Condominium Act"), By executing (this Addendum, the Lessee acknowledges receipt of the Governing Documents from the Lessor and acknowledges review of the same.
- 4.** In the event Lessor is delinquent in the payment of any regular assessment or special assessments due to the Association, the rent for the Unit shall be applied by the Lessee to payment of any delinquent assessment or installment thereof due to the Association before payment of the balance if any, of such rent to the Lessor, If any such assessments and installments are not paid within ten (10) calendar days after the due date the Association shall notify the Lessor of such delinquency by certified and regular mail to the last address furnished to the Association by Lessor and shall notify Lessee of the same by regular mail to the Unit address, Upon receipt of such notice, Lessee shall immediately pay to the Association the amount of such delinquent assessment, including late fees, interest, collection attorney's fees (if any), and shall deduct such sums paid to Association from the next rental payment notwithstanding the foregoing, in the event the sums owing to the Association exceed the Lesse's rental payment.

Lessee shall not be obligated to pay any sums in excess of such rental payment to the Association, if any excess sums are due to the Association, the Lessee is authorized to continue to deduct such sums from each rental payment until such sums have been paid in full. Any such deduction by the Lessee does not constitute a default by Lessee of the Lessee's obligations under the Lease.

5. In the event the lessee fails to pay delinquent assessments and costs and fees incidental thereto, the Lessee be deemed in default under the Lease and subject to eviction proceedings as described in section 6 of this Addendum, in addition to all other remedy the Association may have. The collection of rental payments from the Lessee shall not be denied an election of remedies, and the Association may still proceed to collect delinquent assessments in accordance with the Governing Document and the Condominium Act, including but not limited to the filing of a claim of lien, foreclosure, and personal money actions.

6. Lessee agrees to abide by this Addendum, the Governing Documents and all applicable laws, ordinance, and regulations. If lessee fails to comply with this Addendum, the Governing Documents or any applicable laws, ordinances, and regulations 'Lessor shall promptly commence action to evict Lessee. If Lessor fails to promptly commence action to evict Lessee, Lessor hereby authorized the Association as Lessee's agent and attorney in fact, to commence eviction proceedings. In the event the Association files an action for eviction, the Lessor and the Lessee shall be jointly and severally liable for all attorney's fees and costs including appellate proceedings, nothing contained herein shall be deemed to obligate the Association to commence eviction proceedings or to preclude the Association from pursuing any Other available legal remedies

7. Prior to occupancy of the Unit, Lessor or Lessee shall be required to place in escrow with the Association security deposit equivalent to the Sum of One Thousand Dollars (\$1,000.00), which may be used by the Association to repair any damages to the Common Elements Association property resulting from any acts or omissions of the Lessee (as determined in the sole discretion of the Board of Directors). The Lessee shall be jointly and severally liable with the Lessor to (the Association to affect such repairs, such security deposits shall be administered in accordance With Part II of Chapter 83, Florida Statutes Lessor shall not be entitled to interest on the security deposit.

8. Lessee shall not be entitled to occupy the Unit prior to receipt of written approval from the Board of Directors. In the event the Lessee should occupy the Unit prior to receipt of written approval, Lessee application to lease the Unit shall be deemed automatically withdrawn.

9. The Unit shall be possessed, occupied, and utilized solely for the purpose of a private single family residential, dwelling and for no other response. Lessee warrants and represents that the only occupants are the following Individuals:

10. The Association and/or its authorized agents shall have the irrevocable right to have access to the Unit as may be necessary for inspection, maintenance repair or replacement of any Common Elements accessible there from or for making emergency repairs necessary to prevent damage to the Common Element or other units.

11. The Lessee shall not assign the Lease, nor sublet or permit the Unit or any part thereof to be used by Others without the prior written approval of Association,

12. The Lessee agrees not to keep anything in the Unit which Will increase the insurance rates of the Association or interfere with the rights of other residents of the Association by creating unreasonable noises or otherwise, nor shall Lessee commit or permit any nuisance, immoral or illegal act in the Unit, on the Common Element, or the Limited Common Elements.

13. There shall be no extensions or renewals of the Lease without the prior written approval of the Association.

14. Lessee and Lessor specifically acknowledge that as of the expiration date of the term of the Lease, unless the appropriate approval has been obtained for an extension or renewal of the Lease, the Lessee shall have no access or use on the Association’s property, Including, but not limited to, all Elements and amenities except as an invited guest, in connection with the termination of the Lessee's use rights as specified above, Lessee and Lessor specifically acknowledge that the Association shall have the authority to deactivate and/or terminate all entry devices and/or other means for the Lessee to access the Condominium and/or the Unit as of the expiration date of the term of the lease.

15. When used herein, the singular shall include the plural, the plural the singular and the use of any gender shall include all genders as appropriate.

16. The partial or complete invalidity of any one or more provisions of this Addendum or any other instrument required to be executed by Lessee in connection with the leasing of the Unit, shall not be affected thereby, and each every term and provision otherwise valid shall remain valid and be enforced to the fullest extent permitted, the failure of any party hereto to insist, In any one or more instances, upon the performance of any of the term, covenants or conditions of this Addendum, or to exercise anu right herein, shall not be construed as waiver or relinquishment of such terms, covenants, conditions or rights as respects further performance.

17. Nothing contained in the Lease, this Addendum, or the Governing Documents shall in any manner (i) be deemed to make the Association a party to the lease or this Addendum except to the extent that the Association is an intended third party beneficiary of any of the covenants contained in the above referenced document which are for the benefit and protection of the Association and are necessary to enable the Association to enforce its rights hereunder (ii) create any obligation or liability on the partly of the Association lo the Lessor or Lessee including, without limitation, the obligation as a landlord under applicable law or any liability based on the Association approval of the Lessee pursuant to the Declaration, such approval being solely for the benefit of the Association, or (iii) create any rights or privileges of Lessee under the Lease, this Addendum, or the Governing Documents as to the Association.

IN WITNESS WHEREOF the undersigned have executed this Addendum as of the date first written above,

UNIT OWNER SIGNATURE(S)

LESSEE(S) SIGNATURE(S)



MOVE -IN/MOVE-OUT RESERVATION POLICY

RESERVATIONS ARE SCHEDULED ONLY FROM **MONDAY - FRIDAY, 9:00 am – 5:00 PM**
(NO WEEKENDS MOVE IN/OUT OR DELIVERIES RESERVATIONS ALLOWED)

1. Refundable move-in Elevator Deposit \$1000 (**check/credit card**) to be submitted to the Management Office administrator. If you use Credit Card payment the refund could 7-14 business days.
(Check will be refunded only after inspection by security of damages to elevators and common areas or shredded if not requesting back after 48 hours. If damages occur, check will be used to cover damage that may be Incurred on behalf of the residents and/or their movers or delivery personnel)
2. All move-ins/move-outs and deliveries must be scheduled with the Receiving Department by emailing: receiving@canvascondos.com or calling: **786-475-1027**.
3. **7 Day Notification** required to schedule move-ins/ move-outs and reserve the Service Elevator.
4. All other small deliveries requiring no more than one (1) elevator trip require a **24-hour notification**.
5. Reservations are made on a first-come, first-serve basis. Two (2) units per day will be permitted to reserve the Service Elevators.
6. Maximum **4-hour reservation** time per time slot – two (2) time slots: **9:00 AM - 1:00 PM**, and **1:00PM – 5:00PM**.
7. Elevator protective panels **MUST** be Installed prior to moving. **(done by Security)**
8. All pallets, furniture, boxes, and packing material (bubble wrap, foil, wrap, etc.), bulk items in general must be removed by delivery personnel and dispose of accordingly and may not be thrown inside the trash containers and/or the trash chutes located in the floors and common areas. **No dumping at all.**
9. Moving vehicles must park in designated areas only.
10. Any assembly of work must be performed in units and not in the common areas.
11. The common areas are not available as a work area for delivery persons,
12. No disposal of any boxes or packing material is permitted on your floor.
13. Boxes can be disposed of by being flattened and brought to the designated trash/recycling container on the ground level.
14. Delivery personnel and movers are required to place a protective plastic covering, or another suitable material, over all carpeted areas when transporting items during move-in or delivery. The covering must be removed promptly once the move-in or delivery process is complete.
15. The move must be 100% completed and the corresponding delivery vehicle(s) removed from the premises no later than 1:00 PM or 5:00 PM, respectively.

MOVING/ DELIVERY COMPANIES INSURANCE REQUIREMENTS (see sample- P.13)

- **General Liability** - \$1,000,000
- **Workers Compensation** - \$1,000,000. **(Exemptions are not accepted).**
- **Waiver of Subrogation column must be checked (Y or X) for both GL and WC.**
- **Certificate Holder:** Canvas Condominium Association and KW Property Management and Consulting.

Please contact the following If you require additional assistance:

receiving@canvascondos.com or frontdesk@canvascondos.com



CERTIFICATE OF INSURANCE



CERTIFICATE OF LIABILITY INSURANCE

KWPRO-1

OP ID: LD

DATE (MM/DD/YYYY)
04/24/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
BROWN & BROWN OF FLORIDA INC
14900 NW 79th Court Suite#200
Miami Lakes, FL 33016-5869
Fausto Alvarez

CONTACT NAME: Fausto Alvarez

PHONE (A/C No. Ext): 305-364-7800

FAX (A/C No): 305-714-4401

E-MAIL:

ADDRESS:

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: 'FCCI Insurance Company'

10178

INSURER B: 'FCCI Advantage Insurance Co

12842

INSURER C: 'National Trust Insurance Co.

20141

INSURER D: 'Continental Casualty Co

20443

INSURER E:

INSURER F:

INSURED TEST CUSTOMER

Note # 1

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

PROD LTR	TYPE OF INSURANCE	ADDITIONAL INSURED	SUBROGATION WAIVED	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS MADE ☒ OCCUR	☒	☒	CPP00084917	06/17/2014	06/17/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ Included Emp Ben. \$ 1,000,000 COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
A	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ ALL OWNED AUTOS ☒ HIRED AUTOS ☐ SCHEDULED AUTOS ☒ NON-OWNED AUTOS			CA00118267	06/17/2014	06/17/2015	BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
C	☒ UMBRELLA LIAB ☒ OCCUR ☐ EXCESS LIAB ☐ CLAIMS MADE DED ☒ RETENTION \$ 10,000			UMB00069317	06/17/2014	06/17/2015	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 PER STATUTE OTHER
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	000617	06/17/2014	06/17/2015	E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYED \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
D	Crime			596356933	08/10/2014	08/10/2015	Limits see notes Ded see notes

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Note # 4

CERTIFICATE HOLDER

CANCELLATION

CANVAS Condominium Association &
KW Property Management & Consulting, LLC
1600 NE 1st Ave, Miami, FL 33132

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



RECEIVING DEPARTMENT RULES & REGULATIONS

RECEIVING HOURS ARE ONLY MONDAY - SATURDAY, 9:00 am – 6:00 PM

1. Packages received must have the name of a registered resident only. Packages addressed to non-registered individuals will be returned.
2. Packages can be picked up **only** after notification from the receiving department, not the carrier's (ups/FedEx/USPS, laser, amazon and other) notification.
3. Packages must be picked up within 48 hours after receipt of receiving department notification, not the carrier's notification.
4. Oversize packages will be sent directly to the unit after being confirmed as items **not included in line 6**. We recommend residents to be present at the time of delivery and do not allow carriers to leave any packages in the hallways to avoid damage and/or losses. The association is not responsible for oversized packages delivered by carriers to your unit.
5. Always check you have collected all the packages inside the luxerone locker.
6. Delivery of construction materials, appliances, bathroom shower doors, bathtub, toilets, doors, windows, and the like are to be scheduled through the front desk and/or the office.

Please send an email request to: frontdesk@canvascondos.com

7. Please make sure to obtain measurements for furniture and/or other oversized items (*this does not include items listed in **line 6** which must be scheduled through the office*) before reservation and provide them to the attendant at the time of your request. items which do not fit in the service elevator will not be accepted.

SERVICE ELEVATOR MEASUREMENTS: (8' 6" H) x (6' 8" W) x (5' 6" L)

Applicant Name: _____ Applicant Name: _____

Applicant Signature _____ Applicantsignature _____

Date: _____

Date: _____



Residents Parking Rules Acknowledgement

I _____ hereby acknowledge the information explained to me about the Resident/Guest parking procedure, I understand that I am being notified of the following:

- Residents are allowed to have a maximum of two **(2)** vehicles **only**:
- The first vehicle is self-parked on a first come first serve basis on the **3rd through the 7th floor**.
- No parking against the wall if no parking is found, bring your car to the valet (**no charge**)
- The Second vehicle (if any) is Valet parked **only**.
- Floors **2 and 8 are for Valet parking only**.
- All vehicles must be registered with the Association before authorizing parking.
- To register your vehicle, please schedule an appointment with *Benny*, our Administrative Assistant at admin@canvascondos.com to coordinate this. We will need the vehicle registration (**must be under the applicant's name**) and insurance cards. You must purchase the access car sticker/permit for \$30.
- There is **NO** Guest parking. Guest/visitor parking is restricted due to limited capacity for residents. Please be neighborly and guide your guests to valet (**must pay**) or the public parking outside the building thus our residents can have parking.
- Car stickers will be placed on windshield/headlight by the Administrator; they must be visible and must not be removed from windshield/headlight to be placed in a different vehicle at any time.

By signing below, you agree to abide by Canvas Condominium parking Rules & Regulations.

Resident(s) Signature: _____

Date: _____

Resident(s) Signature: _____

Date: _____