Euclid East Condominium Association, Inc.

1545 Euclid Ave, Miami Beach, FL 33139

Application for Consent to Rent/Sale

This application form fully completed to include the authorization for release of credit report, **a copy of lease/rental contract or sales contract, photo ID, and a check for all fees, must be received by the Association, at the address below**, **no less than twenty (20) days prior to** the date action is desired of the Association. The Board of Directors will have ten days after the interview to approve or deny an applicant. **Missing or incomplete information will cause the application to be returned without action.**

Fees: (non-refundable)

- Application Fee: $150.00 per person (except husband/wife or parent/dependent child).
- **Payable to Euclid East Condominium**

Deposits:

- Tenant Deposit $1,000 (to be paid by either tenant or owner)
- **Payable to Euclid East Condominium**

Address:

Euclid East Condominium Association
1545 Euclid Ave
Miami Beach, FL 33139
Tel: (305) 674-7482 Fax: (305) 674-9534

Welcome Committee Interview Location:

1545 Euclid Ave. in meeting room located in the north garage. Interviews held on the 3rd Thursday of each month / emergency interview available for purchases (not rentals) on the 1st Thursday of each month ONLY.

Restrictions:

- Lease must be for a period of no more than one (1) year.
- Only two residents per bedroom should occupy each unit.
- New Residents must be approved in written form by the Association, and once approved, ten (10) days in advance notice must be given to move in or out, so that the Association can make the proper arrangements.
- Residents are permitted to move into the building between the hours of 9:00am and 4:00pm Monday through Friday. No move in or move on Weekends/Holidays.
- During the process of moving, the security gate in the front of the building must not be left open.
- If you are having work done in your unit it must be done between the hours of 9:00am and 4:00pm Monday through Friday. No construction on weekends/Holidays.
- All future roommates and occupants must be screened and registered.
- Please do not hold open the elevator door longer than needed to move furniture.
- Boxes must be folded and taken to the recycle container / north garage.
- All maintenance fees must be current at time of application.
- Parking for one vehicle only.
- **Any falsehood or material misrepresentation on the application constitutes grounds for rejection and denial of tenancy. _____Signature of Applicant Required.**
- **Washers and Dryers not permitted in units.**
- **If sale buyer agrees to provide Management Company with a copy of Closing Statement**

I certify that I have read and understand the above application and restrictions.

Unit#: _____

Signature of Applicant: _____ Date: _____

Signature of Owner: _____ Date: _____

Application for consent to sale or lease

- This application and the attached Application for Occupancy must be completed in detail by the proposed Buyer
- Please attach a copy of the Sales Contract to this application, or rental agreement.
- The Seller (current owner) shall provide the Buyer with a copy of all the Condominium documents.
- Processing of this application will begin after all required forms have been completed, signed, and in the Management's office.

Date: _____ Unit Number: _____ Approximate Closing Date: _____

Owner's Name: _____ Telephone: _____

Owner's Address (NOT of the unit to be sold): _____

Name and Telephone of Realtor: _____

BUYER INFORMATION

NAME of Proposed Buyer(s) (as they will appear on Title)

a) _____ b) _____

NAME, AGE AND RELATIONSHIP of ALL other family members that will occupy the unit:

NAME	AGE	RELATIONSHIP
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

1. In making the foregoing application I represent to the Board of Directors that the purpose for the purchase of this unit is:
AS PERMANENT RESIDENCE _____ AS SEASONAL RESIDENCE _____ FOR RENTAL _____ OTHER (EXPLAIN) _____
2. I hereby agree for myself and on behalf of all persons who may use the unit which I seek to purchase that we will abide by all the restrictions contained in the By-Laws, Rules and Regulations, Condominium Documents and restrictions which are or may in the future be imposed by the Board of Directors of Euclid East Condominium Association, Inc.
3. I understand that I will be present when guests, relatives or children who are not residents occupy the unit.
4. I have _____ have not _____ received from the current owner a copy of all the Condominium Documents and Rules and Regulations.
5. I understand that the acceptance for purchase of a unit is conditioned upon the truth and accuracy of this application and upon the approval of the Board of Directors. Occupancy prior to final approval is prohibited.
6. I understand that the Board of Directors of the Euclid East Condominium Association, Inc. hereinafter referred to as "the Community Association," may cause to be instituted such as an investigation of my background as the Board of Directors may deem necessary. Accordingly, I specifically authorize the Board of Directors or their Agents to make such an investigation and agree that the information contained in this and the attached application may be used in such investigation, and that the Board of Directors of and Officers of the Community Association itself shall be held harmless from any action or claim by me in connection with the use of the information contained herein or any investigation conducted by the Board.

In making the foregoing application, I am aware that the decision of the Board of Directors will be final and that no reason will be given for any action taken by the Board of Directors. I agree to be governed by the determination of the Board.

_____ _____
Signature of Applicant Signature of Co-Applicant

(Please write legibly)

Name: _____ _____ _____
(Last) (First) (Middle)

Co-Applicant: _____ _____ _____
(Last) (First) (Middle)

Present Address (NOT the address you are moving to): _____
(Street)

_____ _____ _____ _____
(City) (State) (Zip) (Home telephone)

_____
E-mail: _____ (Cell)

Present Landlord/Mortgage Company
(NOT for the address you are moving to): _____ _____
(Name) (Telephone)

Social Security No. _____ _____
(Applicant) (Co-Applicant)

Date of Birth: _____ _____
(Applicant) (Co-Applicant)

Children: _____ Pets: _____
(How many and ages) (Description and approximate weight)

Total Number of people to occupy premises: _____

Is Co-Applicant spouse? If not, specify relationship: _____

In case of Emergency, notify: _____ Telephone: _____

Vehicle 1, type and color: _____ Tag Number: _____

Vehicle 2, type and color: _____ Tag Number: _____

Other vehicle/boat: _____ ID/Tag: _____

EMPLOYMENT INFORMATION:

_____ _____
(Applicant's Employer) (Employer's address)

_____ _____ _____
(Position) (Date of Employment) (Employer's telephone)

_____ _____
(Co-Applicant's Employer) (Employer's address)

_____ _____ _____
(Position) (Date of Employment) (Employer's telephone)

NAME, ADDRESS & PHONE OF RELATIVE:_____

_____

_____

AUTHORIZATION FOR RELEASE OF BANKING, RESIDENCE, EMPLOYMENT, CREDIT AND POLICE INFORMATION

I/we_____
Hereby authorize the release of information to United Screening Services/Arcadia Venture Group Inc. /Euclid East Condominium Inc. and their Representatives Concerning my banking, credit, residence, employment or police records in reference to the application for housing.

I/we understand that this information is used as part of an investigative consumer report and/or credit report. Furthermore, I/we hereby wave any privileges I/we may have with respect to the disclosure of said information to the aforesaid parties.

I/we are also authorizing the Management Company to furnish the Landlord with a copy of the Credit and Police Reports.

_____ _____
Signature of Applicant Date

_____ _____
Signature of Co-Applicant Date

CHARACTER REFERENCES OTHER THAN RELATIVES:

1. _____	**_____**	**_____**
(Name)	(Home telephone)	(Office/work telephone)
_____	_____	_____
(Name)	(Home telephone)	(Office/work telephone)
_____	_____	_____
(Name)	(Home telephone)	(Office/work telephone)

Approval is hereby granted to Euclid East Condominium Association, Inc. as Agent, to investigate all information supplied on this application and a full disclosure of pertinent facts may be made to Euclid East Condominium Association, Inc. Is authorized to obtain credit rating through a credit-reporting agency.

_____ _____

Signature of Applicant Signature of Co-Applicant

Application for Unit # _____ Building # _____ Date: _____

Association Name: Euclid East Condominium Association, Inc.

Address: _____

THIS APPLICATION MUT BE COMPLETED IN FULL BY PROSPECTIVE TENANTS OR OWNERS