

THE METROPOLITAN

Request for Approval of Lease / Rent

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 \$150.00 Non-Refundable application fee per applicant in the form of a money order or cashier's check only and made payable to The Metropolitan Condominium ASSOC. Note: Married couples are considered as one and only a fee of \$200.00 is required. Proof of marriage certificate must be provided.
2. A \$550.00 Elevator Deposit is required, in two separate payments. One for \$500.00 which is Refundable upon moving in or out, in the form of a money order, or cashier check, please leave the payee blank. A \$50.00 Non-Refundable fee for move-in/move-out in the form of a money order or cashier check only and made payable to The Metropolitan Condominium Assoc.
3. A one-time Non-Refundable Dumpster Disposal fee of \$350.00 in the form of a money order, or cashier check only and made payable to The Metropolitan Condominium Assoc.
4. A Non-Refundable pet deposit of \$500.00 in the form of a money order or cashier check made payable to The Metropolitan Condominium Assoc. The following documents are required: A pet picture, Immunization, and a letter from the Veterinary stating the pet is fully grown and will not exceed (40 pounds). Only one pet per unit is allowed, and no pet over 40 pounds are allowed.
5. A maximum of two (2) occupants per bedroom.
6. A copy of the lease agreement/contract must be provided.
7. For Lease / Rental applications: A separate Security Deposit which is the amount of one month of rent in the form of a money order or cashier check only made payable to The Metropolitan Condominium. 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.
8. All applicants over the age of 18 must be screened.
9. All applicants over the age of 18 must provide a copy of valid government-issued identification (i.e., Driver License, Passport, etc.).
10. Submit a copy of the vehicle (s) registrations for registered drivers.
11. All applicants over the age of 18 must provide proof/source of income (i.e., a letter from a bank, bank statements, etc.)
12. Applications along with the above-requested information must be HAND-DELIVERED.

VERY IMPORTANT

- * Rules and Regulations Acknowledgment Form must be signed at the time of the interview by all the adult tenants that will reside on the property.
- * The maximum number of cars permitted on the property is the number of parking spaces assigned to the unit.
- * No commercial vehicles will be allowed to park on the property.
- * Incomplete applications 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 4:00 PM ONLY. Must submit a request to: assistant@themetropolitancondo.com. Occupancy before 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 the certificate holder.

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 acknowledgment of the terms of this application

Date

THE METROPOLITAN

Today's Date: _____

Unit address being leased: 2475 Brickell Avenue 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: _____

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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 #: _____

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

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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 **THE METROPOLITAN 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 **THE METROPOLITAN CONDOMINIUM ASSOCIATION** for their acquisition of said information.

THE METROPOLITAN 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 The Metropolitan 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 The Metropolitan Condominium Association, Inc. requires that the leasing of a unit 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 Metropolitan 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 2475 Brickell Avenue 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 Metropolitan 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 2475 Brickell Avenue 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 The Metropolitan 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 The Metropolitan 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 Metropolitan 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: