

THE POINT AT DELRAY CONDOMINIUM ASSOCIATION, INC.

c/o Real One Property Management
www.RealOnePropertyManagement.com/contact

Real One Property Management
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Fort Lauderdale, FL 33359

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PointAtDelray@realonepm.com | www.pointatdelray.realonepm.com

APPLICATION FOR NEW RESIDENT

OFFICE USE ONLY

Unit Number: _____

Rent: ____ Purchase: _____ Application date: _____

Pending Document? _____ to be submitted: _____ days after "Application date" above.

Background report date: _____ BOD reception of Application: _____

Check List:

Receipt of Governing Documents

**ONLY FOR BUYERS
One Copy per Applicant**

MARK HERE

- Governing Documents: Buyer acknowledges receiving a current copy of the
- 1- Declaration of condominium or Declaration of Covenants.
 - 2- Articles of incorporation
 - 3- Bylaws
 - 4- Rules of the association
 - 5- Copy of the Approved Budget for current year
 - 6- Frequently asked questions and answers document
 - 7- If applicable: Parking Restrictions and Management information.

Applicant Name

Applicant Signature

Date

COMMUNICATION STATEMENT

**ALL APPLICANTS - BUYERS AND TENANTS.
One Copy per Applicant**

I, _____ certify that the following email is correct and I have full access to such email and full authority to receive any communication from the Association or Management Company in regards to this application. I am aware any contact, such as but not limited to approval, denial, or request of the additional documents, will be sent to the email below.

Email: _____

Contact Phone: _____

Applicant Name

Applicant Signature

Date

CONSENT TO RECEIVE ELECTRONIC NOTICES

**PURCHASER ONLY
One Copy
Per Applicant**

THE POINT AT DELRAY CONDOMINIUM ASSOCIATION, INC.

We would like to take this opportunity to request your completion of the information below. The purpose of this is to confirm that we have the most accurate information on file.

We would also like to have your written consent to send you Notices and other information. Per Florida Statutes, we must obtain your approval. The Board and Management staffs thank you in advance for your cooperation.

Name: _____

Property Address: _____ S.E. _____ Unit # _____ Pompano Beach FL 33360

Mailing Address (If different from address above): _____

City: _____ State: _____ Zip: _____

Primary Phone: _____

Alternative Phone: _____

Cell Phone: _____

Emergency Contact Name: _____ **Phone:** _____

E-MAIL ADDRESS(S):

Primary Email: _____

Alternative Email: _____

I agree to accept electronic transmission of all Association information. (Please check one)

YES _____ **NO** _____

Signature: _____ **Date:** _____

Information

Name _____ SS# _____ DOB ____/____/____
Last First MI Jr. Sr., Prior

Spouse _____ SS# _____ DOB ____/____/____
Last First MI Maiden

Drivers License # _____ ST _____ Spouse's Drivers License # _____ ST _____

Other _____
Name Relationship Age SS# Name Relationship Age SS#

Occupants _____
Name Relationship Age SS# Name Relationship Age SS#

Pets: Number _____ Type _____ Breed _____ Weight _____ Age _____

Home Phone (____) _____ Why Moving? _____

Present Address _____
Street Apt. # City State Zip Code

Present Landlord/
 Mortgage Holder _____ Phone (____) _____

Length of Residence: ____/____ To ____/____ Monthly Rent/Mortgage \$ _____ Mortgage Acct. # _____
Mo. Yr. Mo. Yr.

Previous Address _____
Street Apt. # City State Zip Code

Previous Landlord/
 Mortgage Holder _____ Phone (____) _____

Length of Residence: ____/____ To ____/____ Monthly Rent/Mortgage \$ _____ Mortgage Acct. # _____
Mo. Yr. Mo. Yr.

Present Employer _____ City & St. _____ Phone (____) _____

Position _____ Dates Employed ____/____ To ____/____ Income _____ Per _____ Mgr. _____
Mo. Yr. Mo. Yr.

Previous Employer _____ City & St. _____ Phone (____) _____

Position _____ Dates Employed ____/____ To ____/____ Income _____ Per _____ Mgr. _____
Mo. Yr. Mo. Yr.

Spouse Present Employer _____ City & St. _____ Phone (____) _____

Position _____ Dates Employed ____/____ To ____/____ Income _____ Per _____ Mgr. _____
Mo. Yr. Mo. Yr.

In Case of Emergency Notify _____
Name Relationship Address Phone Number

Have you ever had an eviction filed or left owing money to an owner or landlord? Applicant: Yes ___ No ___ Spouse: Yes ___ No ___

Have you applied for residency in the past 2 years, but did not move in? Applicant: Yes ___ No ___ Spouse: Yes ___ No ___

Have you ever had adjudication withheld or been convicted of crime? Applicant: Yes ___ No ___ Spouse: Yes ___ No ___

If you have answered yes to any of the above questions please explain the circumstances regarding the situation on back of this sheet.

AUTHORIZATION OF RELEASE OF INFORMATION Applicant(s) represents that all of the above information and statements on the application for rental are true and complete, and hereby authorizes an investigative consumer report including, but not limited to, residential history (rental or mortgage), employment history, criminal history records, court records, and credit records. This application must be signed before it can be processed by management Applicant acknowledges that false or omitted information herein may constitute grounds for rejection of this application, termination of right of occupancy, and/or forfeiture of fees or deposits and may constitute a criminal offense under the laws of this State.

NON-REFUNDABLE APPLICATION FEE - Applicant(s) agree to pay \$ _____ for a non-refundable application processing fee.

Applicant's Signature _____ Date _____ Spouse's Signature _____ Date _____

RESIDENT DATA FORM

DATE: _____
ADDRESS: _____

OWNERS: MUST PROVIDE ALTERNATE ADDRESS FOR OWNER

NAME: _____
ADDRESS: _____
CITY: _____ STATE _____ ZIP _____
PHONE: _____

UNIT OCCUPANTS:

	Name	Home Phone	Work Phone
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____

Relationship of Unit Owner to Unit Occupant. (If lessee, please attach a copy of the lease.)

PETS: (Please attach photo)

Dog/Cat (Please Circle)

Breed	Name	Color	Sex	Weight (lbs)
_____	_____	_____	_____	_____

VEHICLE DESCRIPTION:

MAKE YEAR MODEL COLOR WEIGHT LICENSE #

EMERGENCY CONTACT:

Name: _____

Address: _____

City: _____

Phone: (home) _____ **Phone (work)** _____

Signature: _____
(Owner or Lessee)

ADDITIONAL INFORMATION:

POINT AT DELRAY CONDOMINIUM AUTO REGISTRATION

NAME _____ UNIT _____

(OWNER/TENANT) CIRCLE ONE

VEHICLE #1

MAKE _____ BODY TYPE _____ COLOR _____

YEAR _____ STATE OF REGISTRATION _____

LICENSE PLATE NUMBER _____

SIGNATURE _____ DATE _____

NAME _____ UNIT _____

(OWNER/TENANT) CIRCLE ONE

VEHICLE #2

MAKE _____ BODY TYPE _____ COLOR _____

YEAR _____ STATE OF REGISTRATION _____

LICENSE PLATE NUMBER _____

SIGNATURE _____ DATE _____

**AUTHORIZATION AGREEMENT FOR ASSOCIATION TO COLLECT
RENT UPON DELINQUENCY IN MAINTENANCE PAYMENTS**

WHEREAS, _____ (herein "Owner"), is the record owner(s) of Unit _____ located at _____, Delray Beach, Florida in The Point at Delray, a Condominium as amended, recorded in the Public Records of Palm Beach County.

WHEREAS, the Point at Delray Condominium Association, Inc. (herein "Association") is the entity charged with the operation and management of the Condominium; and

WHEREAS, Owner desires to lease the unit to _____ (herein "Lessee(s)") pursuant to a lease submitted herewith; and

WHEREAS, the parties desire the approval of the Association for this lease, pursuant to Article 18.6 of the Declaration.

NOW, THEREFORE, in consideration of the mutual covenants contained herein and for other good and valuable consideration, the receipt and adequacy of which is expressly acknowledged, the parties hereto agree as follows:

1. Upon the execution and delivery of this Authority Agreement, the Association shall provide the necessary approval for the lease.
2. If, at any time during the pendency or term of the lease, Owner becomes delinquent in payment of assessments to Association, owner and Lessee(s) agree that the Association shall have the power, right and authority to demand lease payments directly from the Lessee(s) and deduct such past due assessments, costs and attorney fees, if any, as may be delinquent. Further, owner and Lessee(s) agree that Lessee(s) will pay the full rental payment due, to the Association, upon written demand. Owner expressly absolves Lessee(s) from any liability to Owner for unpaid rent under the Lessee Agreement if such payment is made directly to Association upon demand from Association. If any funds are left over, the Association shall immediately remit the balance to Owner at the address listed in the Association's records.
3. Should Lessee(s) fail to comply with the demand of the Association within three (3) days of receipt of a demand for payment hereunder, the Association is hereby granted the authority to obtain a termination of the tenancy, in the name of Owner, through eviction proceedings, or to seek injunctive relief or specific performance under this contract. Owner and Lessee(s) further agree that, if such legal action becomes necessary, the Association shall be entitled to recover reasonable attorney's fees and costs, including appeals, from owner.

Agreed to this _____ day of _____, 20____

THE POINT AT DELRAY CONDOMINIUM ASSOCIATION, INC.

OWNER _____ Lessee(s) _____

By: _____ Attest: _____
President Secretary

THE POINT AT DELRAY CONDOMINIUM ASSOCIATION, INC.

RULES AND REGULATIONS

(Effective as of June 30, 2015)

1. The sidewalks, passages, stairways, corridors and all of the common properties and facilities shall not be obstructed or encumbered or used for any purpose other than ingress and egress to and from the premises. No carriages, bicycles, motorcycles, scooters, wagons, shopping carts, chairs, benches, tables or any other objects of a similar type and nature shall be stored therein.
2. No person shall play or loiter in any corridor, stairway or passage.
3. Pool Rules
 - A. No children under 12 years of age shall use the pool area unless accompanied by an adult.
 - B. Pool hours are from 6:00AM to 10:00 PM.
 - C. No animals are allowed in the pool area.
 - D. No food or drink is allowed on the pool deck within 3 feet of the pool.
 - E. Positively no glass shall be brought into the pool area.
 - F. Please shower before entering the pool.
 - G. No jumping, running or horseplay in the pool area.
 - H. Limited rafts or floats allowed in pool so long as they do not infringe upon others.
 - I. Babies must wear diapers approved for swimming or rubber pants in pool.
 - J. All guests must be accompanied by or sponsored by a resident.
 - K. The use of the barbeque area and tables shall be on a first come first serve basis and can be reserved in advance by filling out the form posted on bulletin board.

1

Initials _____

- L. After use, the patio and/or barbeque area shall be cleaned and all furniture returned to its original place.
- M. No chairs or tables shall be removed from the pool area.
4. Tennis, Handball, and Basketball courts can be used for other activities, so long as they do not harm the courts for the purpose for which they are designed.
 5. Refuse and garbage shall be deposited only in the receptacles (dumpster). Paper goods are to be placed in the "Yellow" container, glass, and plastic in the "Blue" containers. All moving boxes shall be flattened and placed inside the dumpster. For all large items such as furniture, contact Waste Mgt. for pick up. No large items such as furniture are to be placed in or near dumpster. Instructions are posted at each dumpster as to how to address the removal of large items.
 6. Each Unit is allotted two (2) assigned parking spaces. Additional guest parking is available at the pool. Guest spaces are to be used only for guests and visitors of Owners or Residents. No parking is allowed in road, behind parked cars or in the Fire Lane.
 7. No trucks over ¾ ton rated capacity, boats, trailers, tractors, coaches, buses, motor homes or other unsightly, loud or noisy vehicles, machines or devices shall be used, operated, stored or parked in any apartment parking area or other portion of the condominium property, with the acceptance of equipment brought in by approved contractors.
 8. All vehicles on premises shall be properly maintained and have a current registration displayed. All Owner/Resident vehicles shall have a current Point of Delray parking sticker affixed to the left bottom of the rear window.
 9. No unit Owner or Resident shall direct, supervise or in any manner assert control over any employee or contractor of the Association.
 10. No Owner or Resident shall permit any disturbing noises on the common property or facilities by himself or herself, family, friends, visitors, guests, servants, employees or licensees, nor shall they permit any action by such persons that would interfere with the rights, comforts and conveniences of the other unit Owners or Residents. No person shall play any stereo, television, radio, musical instrument or other-sound-making device to disturb or annoy any Owner or Resident after 10:00 PM.
 11. No antenna, satellite dish or aerial shall be erected or installed on the roof or exterior walls of the buildings, or on any common property.

12. No sign, advertisement, notice or other lettering shall be exhibited, displayed, inscribed, painted or affixed in, on or upon any part of the common property, facilities or vehicles by any unit Owner or Resident.
13. No unit Owner or Resident shall create any condition visible from the common elements which is unsightly, or which diminishes the aesthetic beauty of the community.
14. No awning, canopy, shutter or other projection shall be attached to or placed upon the outside walls or roof of the common properties or facilities without the prior written consent of the Board of Directors.
15. No unit Owner or resident shall make any material changes to the landscaping in the common properties or facilities without the prior written consent of the Board of Directors.
16. Pets:
 - A. Each Unit may have a maximum of two (2) pets.
 - B. No pet shall exceed twenty-five (25) pounds in weight.
 - C. No Unit Owner or Resident shall keep any exotic, dangerous or poisonous pets.
 - D. Pet owners shall be responsible for removal of any and all pet droppings from the common Properties and facilities.
 - E. Permitted pets shall not in any way disturb any Unit Owner or Resident.
 - F. Permitted pets shall be kept on a leash or hand carried at all times while in or upon the common properties or facilities.
 - G. The Board of Directors reserves the right to approve or disapprove of any and all pets.
17. Violations of Rules and Regulations.

The Board of Directors may enforce these Rules and Regulations as follows:

 - A. Upon the first violation, the Board shall issue a written or verbal warning.
 - B. Upon a second violation, the Board shall issue a written notice of violation.

C. Upon a third or subsequent violation, the Board may take any and all action it deems appropriate and which is authorized under the Association's Declaration and by municipal, state and federal laws.

I/We _____
have read and fully understand the above Rules & Regulation of The Point at Delray and agree to abide them and all governing documents of the association.

Signature _____ Unit # _____ Date _____

Signature _____ Unit # _____ Date _____

Interview conducted and approved:

Name _____ Title _____ Date _____

Signature _____ Unit # _____ Date _____

Name _____ Title _____ Date _____

Signature _____ Unit # _____ Date _____



BACKGROUND SCREENING REQUEST

Write Name as it appears on your Driver's License

First: _____ Middle: _____ Last: _____

Other Last Names Known By: _____

Current Address: _____

City: _____ State: _____ Zip Code: _____

SSN: _____ Date of Birth: _____

Driver License #: _____ State Issued: _____ Expires: _____

Previous Address: _____

Current Residence

Company Name: _____

Phone #: _____ Email: _____

Move In Date: _____ Move Out Date: _____ Monthly Rent: _____

Do you: Own Lease Family/Friend

Have you ever been evicted from any leased premise? Yes No

Have you ever been convicted of, plead guilty, or "no contest" to a crime that has or has not been expunged or removed from your record? Yes No If yes, please explain: (Make sure to include the city/state/county and the year the crime occurred for each conviction.)

PLEASE INCLUDE A COPY OF A DRIVER'S LICENSE AND SOCIAL SECURITY CARD TO CONFIRM YOUR IDENTITY. If you do not have a Social Security Card, please include a copy of your Passport or current identification card.

I have read and signed the Disclosure and Authorization Agreement.

SIGNATURE: _____ **DATE:** _____

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

Real One Property Management LLC (“the Company”) may obtain information about you from a consumer reporting agency for tenant screening purposes. Thus, you may be the subject of a “consumer report” and/or an “investigative consumer report” which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends or associates. These reports may contain information regarding your criminal history, credit history, motor vehicle records (“driving records”), and verification of your education or employment history or other background checks. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for residency is an investigation into your employment history conducted by

Verify Screening Solutions, Inc. 1720 Harrison St Suite 5A Hollywood FL 33020 (888)983-9511 ; or another outside organization. Information regarding Verify S. S. I., Inc. privacy practices (including information about whether any consumer personal information will be sent outside the U.S. or its territories) may be found at www.applycheck.com. The scope of this notice and authorization is all-encompassing, however, allowing Real One Property Management LLC (the Company) obtain from any outside organization all manner of consumer reports and investigative consumer reports now and throughout the course of your residency to the extent permitted by law. You should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report. Before any adverse action is taken, based in whole or in part on the information contained in the consumer report, you will be provided a copy of the report, the name, address and telephone number of the reporting agency, and a summary of your rights under the Fair Credit Reporting Act.

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of “consumer reports” and/or “investigative consumer reports” by the Company at any time after receipt of this authorization and throughout my residency, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, insurance company, or other party to furnish any and all background information requested by Verify Screening Solutions, Inc. 1720 Harrison St Suite 5A Hollywood FL 33020 (888)983-9511 or another outside organization acting on behalf of Real One Property Management LLC (the Company) and/or Real One Property Management LLC itself. I agree that a facsimile (“fax”), electronic or photographic copy of this Authorization shall be as valid as the original.

<p><u>New York and Maine applicants or tenants only:</u> You have the right to inspect and receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency identified above directly.</p>
<p><u>State of Washington applicants or tenants only:</u> You have the right to receive a complete and accurate disclosure of the nature and scope of any investigative consumer report as well as a written summary of rights of your rights and remedies under Washington law.</p>
<p><u>California applicants or tenants only:</u> By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law. <input type="checkbox"/></p>

Signature: _____ Date: _____
Print Name: _____