

Kendall Acres West Condominium Assoc., Inc.
8401 SW 107TH Avenue
Miami, Florida, 33173
Tel. (305)- 271- 1753

Date: _____
Unit Number: 31- _____

APPLICATION FOR LEASE/ OCCUPANT

MUST PRINT OR TYPE ALL INFORMATION ON THESE FORMS

1. This application, an application for approval, and authorization forms must be completed in detail by each proposed adult occupant(s) (Anyone 18 years and older, other than husband/ wife or parent/dependent child which is considered one applicant) must fill out an application and be screened. Failure to do so will result in automatic rejection or application.
2. If any question is not answered or left blank, this application will be returned, not processed and not approved.
3. Please attach a copy of the Lease contract as it must be submitted with this application.
4. Please attach a non-refundable Notary Fee, MONEY ORDER ONLY, in the amount of \$100.00, made payable to: Kendall Acres West Condominium Assoc., Inc. for each applicant, other than husband/ wife or parent / child (which is considered one applicant). Please allow 20 business days prior to the date of occupancy. (NO CHECKS OR CASH ACCEPTED). Please attach a copy of the Social Security and Driver's License for each applicant.
5. Please attach a non-refundable Notary Fee, MONEY ORDER ONLY, in the amount of \$15.00 (No Personal Checks), made payable to: Courtesy Property Management.
6. The completed application must be submitted to the Association office at least 20 days for processing.
7. All applicants must take themselves available for a personal interview prior to final Board of Directors approval. Occupancy prior to Board approval is prohibited.
8. No dogs allowed at any time.
9. No Leasing or Renting of a unit permitted during the first year of ownership.
10. No commercial vehicles, trucks, boats, trailers, motor homes, campers, recreational vehicles, etc. permitted to park on the premises overnight.
Disabled, expired tag, unlicensed, derelict or abandoned motor vehicles may not be parked, stored or kept upon the Condominium Property without the prior written consent of the Board of Directors.
Only 1 assigned parking space available per unit.
11. The (current owner) must provide TENANT with a copy of all Association Documents and The Rules and Regulations.
12. Occupancy regulations:
One bedroom unit- no more than 2 occupants **only**.
Two-bedroom unit- no more than 4 occupants **only**.
Three-bedroom unit- no more than 6 occupants **only**.
13. Moving of furniture in or out of a unit must be completed by 9:00PM.

*****Applicants are prohibited to move-in until approval from the Board is received.*****

PLEASE BE ADVISED SUBMITTAL OF THE APPLICATION DOES NOT CONSTITUTE AUTOMATIC APPROVAL

For further rules and restrictions, please read the Rules & Regulations and the By-Laws of the Association, before completing this application.

Current Owner's Name: _____ Telephone Number: _____

Owner's New Mailing Address: _____

Property Address: _____ Zip Code: _____

Cellular: _____ Work: _____

Name of Realtor Handling Sale: _____ Cellular: _____

Realtor's Office #: _____

**ADDENDUM TO OWNER APPLICATION
TO KENADALL ACRES WEST CONDOMINIUM ASSOCIATION, INC.
TO LEASE**

I (we) hereby affirm that as Owner(s) of Unit No. _____ of Kendall Acres West Condominium, I/we have reviewed the Rules & Regulations of the Association with the prospective tenant(s) applying for permission to occupy the unit.

I/we additionally affirm that I/we will be responsible for any and all actions in violation of said Rules & Regulations by any tenant, occupant, visitor and other persons entering into the Condominium property for or on behalf of said tenant(s) for said unit.

My/ Our new mailing address is: _____

City: _____ State: _____ Zip Code: _____

I/we may be reached at:

Personal Phone: _____ Work Phone: _____

Email: _____ Other: _____

Thank you.

Acknowledgment:

Owner Signature: _____ Date: _____

Printed Name: _____

Owner Signature: _____ Date: _____

Printed Name: _____

Address Change Request Form

Account No.: _____

I/ we own the following property, which is being leased/rented and would like to make an address change as follows:

Name of Association: KENDALL ACRES WEST CONDOMINIUM

Owner's Name(s): _____

Property Address: _____ Unit No: _____

City: _____ State: _____ Zip Code: _____

Please forward all my correspondence to my new address at:

New Address: _____ Unit No: _____

City: _____ State: _____ Zip Code: _____

Home Tel.: _____ Work Tel.: _____

Cellular: _____ Fax: _____

Acknowledgment:

Signature

Please Print Name

Signature

Please Print Name

Date

Please return to:

Kendall Acres West Condominium Association, Inc.
8401 SW 107th Avenue, Miami, FL, 33173
Phone:(305)-271-1753 Fax:(305)-271-1708
Email: Kendallacreswest@bellsouth.net

THIS FORM MUST BE FULLY COMPLETED, SIGNED AND LEGIBLE OR CHANGES WILL NOT BE MADE.



WESTERN REPORTING ^{INC}

Western Reporting
1787 E. Fort Union Blvd Suite 107
Salt Lake City, UT 84121

Phone: 801-308-0005 Fax: 801-308-0015

Toll-free phn: 800-466-1996 Toll-free fax: 800-351-4558

**PERSONAL RELEASE FORM
COMBINED DISCLOSURE NOTICE AND AUTHORIZATION
REGARDING BACKGROUND CONSUMER REPORTS – TENANT**

Account Name with Western Reporting: KENDALL ACRES WEST CONDOMINIUM

Requestor's Name: RAFAEL REVILLA Phone #: (305)- 271- 1753

IMPORTANT: Please read carefully before signing.

A consumer report and/or investigative consumer report including information concerning your character, employment history, rental history, personal characteristics, police record, credit and indebtedness may be obtained in connection with your rental application. A consumer report and/or an investigative consumer report may be obtained at any time during the application process. If adverse action is taken, based in whole or in part on the information contained in the consumer report, you are entitled to receive a denial letter. The name, address and telephone number of Western Reporting, and a summary of your rights under the Fair Credit Reporting Act will be included. You may contact Western Reporting for a copy of the consumer report.

AUTHORIZATION

You hereby authorize and request, without any reservation, any present or former employer, landlord, police department, financial institution, consumer reporting agencies, credit bureaus or other persons or agencies having knowledge about you to furnish Western Reporting with any and all background information in their possession regarding you, in order that your suitability as a potential tenant may be determined.

By signing below, you hereby authorize without reservation, any party or agency contacted by Western Reporting to furnish the above mentioned information. You also agree that a fax or photocopy of this authorization with your signature be accepted with the same authority as the original.

Please print legibly to speed up processing time

APPLICANT'S FULL NAME:
APPLICANT'S SSN:
APPLICANT'S DOB:
APPLICANT'S FULL ADDRESS:

READ, ACKNOWLEDGED AND AUTHORIZED

Signature of Applicant

Date

For California applicants only, if you would like to receive a copy of the report, if one is obtained, please check this box.
For Minnesota or Oklahoma applicants only, if you would like to receive a copy of the consumer report, if one is obtained, please check this box.

INSTRUCTIONS:

1. Applicants that are not married must complete the following form individually.
2. Write legibly or type all information. Account and telephone numbers and address are required.
3. If any question is not answered or left blank, this application may be returned, not processed or not approved.
4. Missing information will cause delays in processing your application.
5. Only the applicants are authorized to sign this form.
6. Any misrepresentation or falsification of information may result in disqualification.

Application for Occupancy/ Approval

Tenant
Print or Type

Date _____

Apt. No. _____ Bldg. No _____

Desired Date of Occupancy _____

Name _____

Date of Birth _____

SSN _____

Phone _____

Spouse _____

Date of Birth _____

SSN _____

Phone _____

[] Single [] Married [] Widow(er) [] Div. _____
(How Long)

Maiden Name _____

Number of people who will occupy, Adults (over age 18) _____ Children (over 18) _____ Children (under 18) _____

Names & Age of children who will occupy _____

Email _____

In case of emergency (specify) _____
(Name) (Relation) (Telephone)

Residence History

A. Present Address _____
Name of Apt./ Condo _____
Phone _____ Date of Residency _____
Name of Landlord or Mortgage Co. _____
Address _____ Phone _____

Employment & Bank Reference

A. Employed by (Business Name) _____ Phone _____
Date of Employment _____ Dept. or Position _____
Mo. Income _____ Address _____

B. Spouse Employment (Business Name) _____ Phone _____
Date of Employment _____ Dept. or Position _____
Mo. Income _____ Address _____

C. Bank Reference _____ Phone _____
How Long _____ Ck. Acct. No _____ Sav. Acct. No _____
Address _____

If the application is NOT tangible or is not completely and accurately filled out, Renters Reference of Florida, Inc. (and the Association) will not be liable or responsible for any inaccurate information in the investigation and related report (to the Association) caused by such omissions or legibility. By signing, the applicant recognizes that the Association or their agent, Renter Reference of Florida, Inc. may investigate the information supplied by the applicant and a full enclosure of pertinent facts may be made to the Association. The investigation may be made of the applicant's character, general reputation, personal characteristics, credit standing, police arrest record and mode of living as applicable. I may request, in writing, within a reasonable time, a complete and accurate disclosure of the nature and scope of any investigation.

Signature _____
(Applicant)

Signature _____
(Applicants Spouse)

KENDALL ACRES WEST CONDOMINIUM ASSOCIATION, INC.

Tenant Affirmation

Date: _____

Unit No: _____

TO: Board of Directors of Kendall Acres West Condominium Association

I, (we) _____, _____ certify
that I do not (we do not) (our family does not):

- Own a dog; and
- Will not bring a dog

On to the property during my (our) occupancy at Kendall Acres West Condominium and will inform my (our) guests that they are not allowed to bring a dog on to the property either.

Signature _____

Name _____

Signature _____

Name _____

**Kendall Acres West Condominium
Association, Inc.
8401 SW 107th Avenue.
Miami, FL, 33173**

Date: _____

Owner: _____

New Address: _____

RE: Lease Agreement between _____ (hereinafter referred to as the "Unit Owner"), and _____ (hereinafter referred to as the "Tenant"), dated _____ for Unit No. _____ located at Kendall Acres West Condominium

The Unit Owner and Tenant attest to entering into the above referenced Lease Agreement.

According, the Unit Owner and Tenant hereby acknowledge that they are jointly and severally liable to Kendall Acres West Condominium Association, Inc. (hereinafter referred to as the ("Association")) for any and all violation(s) of the Association's governing documents by the Tenant and/ or their guests, invitees or licensees. Violation of the Association's governing documents include, but are not limited to, the following:

- *Having dogs in the condominium property;
- *Failure to comply with the rules and regulations in relation to parking and assigned spaces;
- *Failure to comply with the rules and regulations regarding the use of the pools and the clubhouse;
- *Failure to comply with the rules and regulations in relation to the proper use of the tennis courts and common areas of the condominium;
- *Any damage caused to the elevators and/ or stairs during the process of moving in or out of the property;
- *Failure to comply with the rules and regulations in relation to interfering with the rights of other owners or residents within the condominium; and
- *Failure to comply with the rules and regulations regarding leaving garbage in corridors and catwalks and/ or not depositing garbage in the proper containers.

Additionally, the only tenants authorized to reside in the property are those listed in the Lease Agreement entered on _____ and which is attached to the Lease Application. Said authorized tenants are as follows:

- 1.
- 2.
- 3.
- 4.

Unit Owner and Tenant hereby acknowledge and agree that if anyone other than the above listed individuals' desires to move into the property, such person (s) will be required to apply and be approved by the Association's Board of Directors in order to legally reside in the condominium. Any person moving into the property without the prior authorization of the Association's Board of Directors will be considered an **illegal tenant** and the Association shall have the right to proceed with the appropriate legal action without further notice. In said event, the Association shall hold the Unit Owner and/ or Tenant liable for any and all attorney's fees and costs incurred.

READ, AGREED AND ACCEPTED THIS _____ DAY OF _____, 20_____.

UNIT OWNER:

BY: _____

BY: _____

READ, AGREED AND ACCEPTED THIS _____ DAY OF _____, 20_____.

TENANT:

BY: _____

BY: _____