

NO WASHERS OR DRYERS ALLOWED



VILLAGE BROOKE CONDOMINIUM ASSOCIATION, INC.
3247 Beneva Road Sarasota, FL 34232
(941) 922-0141

Application For Approval

MUST BE COMPLETED BY OWNER OR AGENT AND MUST BE SUBMITTED WITH APPLICATION PACKET WITHIN (10) BUSINESS DAYS PRIOR TO DESIRED POSSESSION.

PLEASE CHECK ONE: **SALE:** **NEW LEASE:** **LEASE RENEWAL:** **INHERITANCE:**
GIFT: **OTHER:** _____

SALE REMINDER: VILLAGE BROOKE CONDOMINIUM ASSOCIATION, INC RESERVES THE FIRST RIGHT OF REFUSAL.

1. Application Date: _____ Applicant: _____
2. Agent: _____ Term Dates: _____ (If applicable)
3. Agent Phone: _____ Address _____

The following items must be completed and/or submitted with the application:

1. - Copy of Lease or Sales agreement.
2. - A non-refundable application/background fee of \$150.00 made payable to **Village Brooke**.
3. - A non-refundable estoppel fee of \$250.00. (*Expedited or past due, additional fees will apply*)
4. - Seasonal renewal fee of \$50.00. (*If applicable*)
5. - Copy of a valid form of Identification: (*i.e., Driver's License, Military ID, Visa, Passport, etc...*)
6. - It is the responsibility of the applicant to review the Village Brooke Rules & Regulations.

Additional Information:

Seasonal Leases: Minimum – two (2) months. Maximum – six (6) months. Up to three (3) leases in a calendar year. ****Seasonal rentals cannot be more than 6 months to the same lessee**.**

****No Pets, Pick-up Trucks or Motorcycles.**

****Washers or Dryers are prohibited in units with hook-ups.**

<u>Occupancy Regulations:</u>	One Bedroom	No more than (2) occupants
	Two Bedroom	No more than (4) occupants
	Three Bedroom	No more than (6) occupants

When all necessary documents including the results of the background check are received at our office, they will be forwarded to the Board of Directors, which will then contact the applicant to schedule an in-person orientation.

PLEASE NOTE: It is the responsibility of the applicant to assure that all forms are ***filled in completely*** and submitted to Village Brooke. If any questions are not answered or is left blank, this application may be returned, not processed, and/or not approved.

Please Check One: **Note:** Seasonal Lease = Min: of 2 mos.- No more than 6 mos. per year.

Purchase: Bldg. # 32..... Unit..... Closing Date -

Annual Lease: Bldg. # 32..... Unit..... # Bedrooms:..... Start:..... End:.....

Seasonal Lease: Bldg. # 32..... Unit..... # Bedrooms:..... Start:..... End:.....

Applicant(s) Information:

Applicant 1: SSN:.....
First Name Last Name MI

Date of Birth: Phone#: (.....)..... Email:
mm/dd/yyyy

CHECK ONE: U.S. Citizen: Permanent Resident Alien:

Alien Visa #: Passport #:

Applicant 2: SSN:.....
First Name Last Name MI

Date of Birth: Phone#: (.....)..... Email:
mm/dd/yyyy

CHECK ONE: U.S. Citizen: Permanent Resident Alien:

Alien Visa #: Passport #:

Applicants' Relationship: CHECK ONE: Married: Roommates: Siblings: Other:

Number of people who will occupy the unit:

List names and ages of people who will occupy the unit:

.....
Name	Age	Name	Age
.....
Name	Age	Name	Age
.....
Name	Age	Name	Age

Resident History

Present Address: Contact#:

Name: Date(s):
Apt/Condo/Landlord/Mortgage Holder

Previous Address: Contact#:

Name: Date(s):
Apt/Condo/Landlord/Mortgage Holder

Prior Address: Contact#:

Name: Date(s):
Apt/Condo/Landlord/Mortgage Holder

Employment Information

Applicant 1:
Employer / Company Name Address
.....
Contact Number Length of Employment Dept or Position Monthly Income

Applicant 2:
Employer / Company Name Address
.....
Contact Number Length of Employment Dept or Position Monthly Income

Banking Information

Bank Reference: Acct#: Phone #:

Character References

- 1.
Name Address Phone #
- 2.
Name Address Phone #
- 3.
Name Address Phone #

Vehicle Information

Applicant 1:
Driver's License Number State

Vehicle:
Make Model Color License Plate # State

Applicant 2:
Driver's License Number State

Vehicle:
Make Model Color License Plate # State

Acknowledgement / Signatures

In order to facilitate consideration of my application for the purchase/lease of the above designated unit in Village Brooke Condominium Association, Inc., I represent that the following information is factual. I am aware that any falsification or misrepresentation of the facts in the application will result in automatic rejection of this application. I consent that you may make further inquiry concerning this application.

.....
Print Name Applicant 1 Sign Name Applicant 1 Date

.....
Print Name Applicant 2 Sign Name Applicant 2 Date

Have you ever resided annually/seasonally in Village Brooke?..... If so, when?.....

Have you ever been convicted or plead guilty to a crime? If so, please explain the circumstance:

.....
.....
.....

I will abide by the restrictions contained in the Village Brooke documents and rules and regulations, and restrictions which are or may in the future be imposed by Village Brooke Condominium Association, Inc.

I understand that there is a restriction on pets and that I may not bring a pet, nor may any guest or visitor bring a pet into Village Brooke Condominium Association, Inc.

I understand that I must be present when any guests, relatives, visitors, or children who are not permanent residents occupy the unit or use the recreational facilities.

I understand that sub-leasing or occupancy of this unit in my absence is prohibited.

I understand that any violation of the terms, provisions, conditions, and covenants, of the Village Brooke Condominium Association, Inc. documents provides cause for immediate action as therein provided of termination of the leasehold.

I have received a copy of the Rules and Regulations:_____. (initial)

I understand that the acceptance for re-sale/lease at Village Brooke Condominium is conditioned upon the truth and accuracy of this application and upon the approval of the Board of Directors and will be advised of acceptance or denial. Any misrepresentation or falsification of information of these forms will result in the automatic rejection of this application.

In the event the owner permits their applicant to occupy or take possession of the premise prior to approval by the association, the unit owner shall pay the sum of \$50.00 per day of such occupancy unless waived by the association.

I understand that the Board of Directors of Village Brooke may cause to institute an investigation of my background as the board may deem necessary. Accordingly, I specifically authorize the Board of Directors, Management, and APS. to make such 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, officers, and the management of Village Brooke itself shall be held harmless from any action or claim by me in connection with the use of information contained by the Board of Directors.

In making the foregoing application, I am aware that the decision of the Village Brooke Condominium Association, Inc. will be final and 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 of Directors.

Applicant #1: Print Name: Signature: Date:

Applicant #2: Print Name: Signature: Date:

