

**MODERN VILLAS
HOMEOWNERS' ASSOCIATION INC.,
PURCHASE APPLICATION**

Dear Applicant;

Please complete all paperwork in full and submit a \$125 non-refundable processing fee per applicant and \$50 background/credit check fee per adult made payable to:

Soleil Property Management
PO Box 212964
Royal Palm Beach, FL 33421

NOTE: All resident(s) 18+ years of age are subject to background screening and an additional \$50 per applicant is required.

Checklist for application processing:

- Executed "Application to Purchase"
- Copy of Purchase Contract
- Legible copy of each purchaser's Drivers License or Photo ID
- Signed by all applicants: Rules and Regulation Acknowledgement
- Residential Screening Request(s)
- Disclosure and Authorization Agreement

**Application must be submitted at least 30 days prior to intended closing.
Occupancy prior to approval is strictly prohibited. Interview is required.**

If you have any further questions please feel free to contact our office at (561) 225-1524.

Thank you for your anticipated cooperation,

Very truly yours,

Soleil Property Management

As authorized agent for the Board of Directors
Modern Villas Homeowners' Association, Inc.

**MODERN VILLAS
HOMEOWNERS' ASSOCIATION INC.,**

Application for Occupancy Notice

NO PETS

Only state certified service animals are permitted.

Initial _____

Initial _____

**MODERN VILLAS
HOMEOWNERS' ASSOCIATION, INC.
CONFIDENTIAL APPLICATION FOR PURCHASE**

To the members of MODERN VILLAS HOMEOWNERS' ASSOCIATION

Request is hereby made by the undersigned to purchase a villa in Modern Villas Homeowners Association. The undersigned agrees to accept occupancy in accordance with the terms and provisions of the Association as contained in the Rules & Regulations, the Declaration of Covenants and Restrictions, its attachments and exhibits thereto, as they may be amended from time to time.

(Please Print)

Date: _____

Name of Applicant

DOB: _____ **SSN:** _____ **Phone** _____

Single ___ **Married** ___ **Separated** ___ **Divorced** ___

Name of Co-Applicant

DOB: _____ **SSN:** _____ **Phone** _____

Single ___ **Married** ___ **Separated** ___ **Divorced** ___

Number or people over the age of 18 years who will occupy _____

Number of children who will occupy _____ **Ages** _____

PART I – RESIDENCE HISTORY

Current Address _____

Phone _____ **Dates of Residency: from** _____ **to:** _____

Name of Landlord or Mortgagee: _____

Previous Address _____

Phone _____ **Dates of Residency: from** _____ **to:** _____

Name of Landlord or Mortgagee: _____

Initial _____

Initial _____

PART II – EMPLOYMENT HISTORY & BANK REFERENCES

Applicant Employer: _____ **Phone:** _____

How long? _____ **Position** _____ **Approx. mo. Income** _____

Address: _____

Co-Applicant Employer: _____ **Phone:** _____

How long? _____ **Position** _____ **Approx. mo. Income** _____

Address: _____

Bank Reference _____ **Phone:** _____

Address: _____

How Long: _____ **Checking account No:** _____

VEHICLES ON PREMISES

NUMBER OF CARS _____ (only **ONE parking space is assigned per unit**, which is the driveway to the unit) one guest space may be utilized for additional parking. Absolutely no commercial vehicles, boats, motor homes, trailers, campers and the like are permitted to park on the property, except to render service to a residence or to load or unload.

MAKE _____ **MODEL** _____ **YR** _____ **LISC PLATE#** _____ **STATE** _____

MAKE _____ **MODEL** _____ **YR** _____ **LISC PLATE#** _____ **STATE** _____

1ST APPLICANT'S DRIVERS LICENSE NUMBER _____ **STATE** _____

2ND APPLICANT'S DRIVERS LICENSE NUMBER _____ **STATE** _____

IF THIS APPLICATION IS NOT LEGIBLE OR IS NOT COMPLETELY AND ACCURATELY FILLED OUT, MODERN VILLAS HOMEOWNERS ASSOCIATION, OR MANAGEMENT WILL NOT BE LIABLE OR RESPONSIBLE FOR ANY INACCUATE INFORMATION IN THE INVESTIGATION AND RELATED REPORT (TO THE ASSOCIATION CAUSED BY SUCH OMISSIONS OR ILLEGIBILITY.

BY SIGNING, THE APPLICANT RECOGNIZES THAT THE ASSOCIATION, MANAGEMENT OR AGENCY MAY INVESTIGATE THE INFORMATION SUPPLIED BY THE APPLICANT AND A FULL DISCLOSURE 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.

SIGNATURE OF
APPLICANT _____ **DATE** _____

SIGNATURE OF 2ND
APPLICANT _____ **DATE** _____
(IF NOT A DEPENDENT CHILD)

Initial _____

Initial _____

Three Personal References:

Name _____

Address _____

Phone _____

Name _____

Address _____

Phone _____

Name _____

Address _____

Phone _____

PART III – ACKNOWLEDGEMENT

1ST APPLICANT: Have you ever been convicted or pled guilty to a crime? (Circle one) Yes / No. If yes please state date(s) charge(s) and disposition(s);

2ND APPLICANT: Have you ever been convicted or pled guilty to a crime? (Circle one) Yes / No. If yes please state date(s) charge(s) and disposition(s);

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1. I hereby agree for myself and on behalf of all persons who may use the unit which I seek to Lease/Purchase:
 - a. I will abide by all restrictions contained in the By-Laws, Rules & Regulations and Restrictions which are or may in the future be imposed by **Modern Villas Homeowners Association**.
 - b. I understand that no more than two (2) persons may reside in bedroom, including dependent children.
 - c. I understand that I must be present when any guest, relatives, visitors or children who are not permanent residents occupy the unit.
 - d. I understand that sub-leasing or occupancy of this unit in my absence is prohibited.
 - e. I understand that any violation of these terms, provisions, conditions, and covenants of the **Modern Villas** documents provides cause for immediate action as therein provided or termination of the leasehold under the appropriate circumstances.
 2. **I have received a copy of the Rules and Regulations: (Circle one) Yes / No.**
 3. **I understand that I will be advised by the Board of Directors of either acceptance or denial of this application. Occupancy prior to Board approval is prohibited.**
 4. I understand that the acceptance for the Lease/Purchase at **Modern Villas** is conditioned upon the truth and accuracy of this application and approval of the Board of Directors. Any misrepresentation or falsification of information on these forms will result in the automatic disqualification of your application. Occupancy prior to board approval is prohibited.
 5. I understand that the Board of Directors of **Modern Villas** may cause to be instituted any investigation of my background as the Board may deem necessary. Accordingly, I specifically authorize the Board of Directors, or it's Management to make investigation and that the information contained in this and the attached application may be used in such investigation and that the Board of Directors, Officers and Management of **Modern Villas** 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 of Directors.

In making the forgoing application, I am aware that the decision of the MODERN VILLAS HOMEOWNERS' ASSOCIATION will be final and no reason will be given for any action taken by the Board of Directors.

Applicant Signature

Date

Joint Applicant Signature (if applies)

Date

WITNESS:

Date

/ Ref# _____

RESIDENTIAL SCREENING REQUEST

First: _____ Middle: _____ Last: _____

Address: _____

City: _____ ST: _____ Zip: _____

SSN: _____ DOB (MM/DD/YYYY): _____

Tel#: _____ Cel#: _____

Current Employer

Company: _____ Tel#: _____

Supervisor: _____ Salary: _____

Employed From: _____ To: _____ Title: _____

Current Landlord/Mortgagee

Company: _____ Tel#: _____

Landlord: _____ Rent: _____

Rented From: _____ To: _____

I have read and signed the Disclosure and Authorization Agreement.

SIGNATURE: _____ **DATE:** _____

/ Ref# _____

RESIDENTIAL SCREENING REQUEST

First: _____ Middle: _____ Last: _____

Address: _____

City: _____ ST: _____ Zip: _____

SSN: _____ DOB (MM/DD/YYYY): _____

Tel#: _____ Cel#: _____

Current Employer

Company: _____ Tel#: _____

Supervisor: _____ Salary: _____

Employed From: _____ To: _____ Title: _____

Current Landlord/Mortgagee

Company: _____ Tel#: _____

Landlord: _____ Rent: _____

Rented From: _____ To: _____

I have read and signed the Disclosure and Authorization Agreement.

SIGNATURE: _____ **DATE:** _____

DISCLOSURE AND AUTHORIZATION AGREEMENT
REGARDING CONSUMER REPORTS

DISCLOSURE

A consumer report and/or investigative consumer report including information concerning your character, employment history, general reputation, personal characteristics, criminal record, education, qualifications, motor vehicle record, mode of living, credit and/or indebtedness may be obtained in connection with your application for and/or continued residence. **A consumer report and/or an investigative consumer report may be obtained at any time during the application process or during your residence.** Upon timely written request of the management, and within 5 days of the request, the name, address and phone number of the reporting agency and the nature and scope of the investigative consumer report will be disclosed to you. 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.

AUTHORIZATION

You hereby authorize and request, without any reservation, any present or former employer, school, police department, financial institution, division of motor vehicles, consumer reporting agency, or other persons or agencies having knowledge about you to furnish ScreeningReports with any and all background information in their possession regarding you, in order that your residence qualifications may be evaluated. You also agree that a fax or photocopy of this authorization with your signature be accepted with the same authority as the original.

READ, ACKNOWLEDGED AND AUTHORIZED

Print Name (applicant 1)

Signature

Date

Print Name (applicant 2) if applicable

Signature

Date

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