



Soleil Property Management

P.O. Box 212964

Royal Palm Beach, FL 33421

Office: (561) 225-1524

www.soleilpropertymanagement.net

PROCEDURE TO OBTAIN REQUIRED ASSOCIATION SALE APPROVAL

The Association's relationship is with the owner of record. When the owner sells his/her home and closing date has been set, the owner is to notify us. To obtain the required approval (which must be at the closing, signed by the buyer and recorded with the deed by the closing agent after closing) please send us:

1. A copy of the "Contract for Sale" or its equivalent.
2. This application, an application for approval, and authorization forms must be completed in detail by each proposed adult occupant of the home, other than the purchasers spouse, parent, or dependent child. If any information is left blank, the application will be returned to the agent not processed and unapproved.
3. A non-refundable check or money order for each applicant in the amount of \$100.00 per applicant must be made payable to Classics at Bear Lakes Homeowner's Association Inc. and attached to the application. Acceptance of processing fee does not in any way constitute acceptance of the conveyance.
4. **The completed application along with the application processing fee of \$125 and a background screening fee of \$50 for each adult 18 or older must be made payable to Soleil Property Management and must be received by Soleil Property Management at least 30 days prior to the proposed closing date. If not you MUST reschedule your closing.**
5. Any violations on the property to be purchased must be corrected before the interview/orientation will be scheduled.
6. Tell us where you want the approval sent. (a reliable source is recommended)
7. The homeowner documents require that the owner take these steps in a timely manner. Should the owner choose to delegate this responsibility he or she needs to understand that the ultimate obligation rests with him/her.
8. The seller is obligated to provide the buyer, prior to closing, a full set of homeowner documents as the buyer will sign on our approval that he had received same and agrees to abide by them.
10. In order to assist us please send the completed application, contract and where to send the approval, at one time together to the address at the top of this form.

IMPORTANT NOTICE

Most mortgages/banks require that they be provided with a "Certificate of Insurance" from our insurance agent **BEFORE THEY WILL CLOSE THE SALE**. Please note that you or the bank must contact the agent to obtain this certificate.

The Classics at Bear Lakes HOA, Inc.

APPLICATION FOR CERTIFICATE OF APPROVAL

Date _____ Lot # _____

INFORMATION CONCERNING APPLICANT:

Name: _____ Marital Status: _____

Present Address _____

e-mail address _____

Do you intend to occupy the home? _____ Present Phone # (____) _____

Cell Phone #1(____) _____ #2 (____) _____

Spouse's Name: _____ Number of Children: _____

Names and ages of children: _____

Occupants in the home other than immediate family:

Name: _____ Relation: _____ Age: _____

Name: _____ Relation: _____ Age: _____

Name: _____ Relation: _____ Age: _____

Applicant's Employer: _____ Title: _____ No. of Years _____

Address: _____ Phone: (____) _____

Make of Vehicle: _____ Type: Car [] SUV [] Truck: [] Other: _____ Tag No. _____

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Please List All Pets:

Dogs: # _____ Breed _____ # _____ Breed _____

Cats: # _____ Other Pets, Describe: _____

Nearest Relative in case of emergency: _____

Phone: (____) _____ Relationship: _____

Address: _____

I (We) hereby agree to abide by all the Documents and Rules and Regulations of The Classics at Bear Lakes Homeowner's Association, Inc. a copy of which I received from the seller or lesser.

Owner and/or Lessee agree that the terms of the attached lease or contract are within the requirements of The Classics at Bear Lakes Homeowners Association Rules and Regulations pertaining thereto.

Renters or Lessees are not allowed to sub-lease the property at anytime.

All assessment billings and official mail should be sent to:

The Classics at Bear Lakes Address

Other: _____

Please notify The Association of any change of address.

Estimated Closing Date _____

BUYER/LESSEE: _____ DATE: _____

SELLER/LESSOR: _____ DATE: _____

Board Approval: _____ DATE: _____

Title: _____

Please Note:

Personal interview of the buyer or lessee is required. Contact; Loraine Cates at 561-478-1193

Consent to Background Investigation and Release of Liability

I (we) understand that the Board of Directors of the Classics at Bear Lakes Homeowner's Association, Inc. may cause to be instituted an investigation of my background as the Board may deem necessary. Accordingly, I (we) specifically authorize the Board of Directors or Soleil Property Management to make such an investigation and agree that the information contained in this and the attached application may be used in such an investigation and that the Board of Directors, Officers, and Soleil Property Management 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 or its authorized agents.

In making the foregoing application, I (we) am (are) aware that the decision of Classics at Bear Lakes Homeowner's Association, Inc. will be final and no reason will be given for action taken by the Board of Directors. I (we) agree to be governed by the determination of the Board of Directors.

Social Security #

Applicant Signature and Date

Social Security #

Applicant Signature and Date