

JUPITER INLET COVE CONDO OWNERS' ASSOCIATION, INC.

c/o Soleil Property Management
PO Box 212964
Royal Palm Beach, FL 33421
Office: (561) 225-1524
Email: info@soleilpropertymanagement.net

APPLICATION FOR SALE

The Association requires all prospective owners to attend an orientation meeting to discuss the rules and regulations of the community. Failure to comply may result in your application being declined. Failure to comply with the rules and regulations of the community will result in legal action by the Association Attorneys.

All prospective buyers must complete the Association's application and must submit the following documents:

Association Application
Copy of valid identification card and/or driver's license for ALL residents over 18.
Copy of Fully Executed Sales Contract

Your application will be returned as incomplete if any of the above is missing.

BE ADVISED A NATIONWIDE CRIMINAL and CREDIT BACKGROUND CHECK WILL BE CARRIED OUT ON ALL APPLICANTS A FREE AND CLEAR CRIMINAL BACKGROUND CHECK WILL BE REQUIRED IN ORDER TO BE APPROVED.

There is a **\$150.00** non refundable application fee per adult (18 years or older) payable in either a cashier's check or a money order payable to Soleil Property Management, Inc. There is a **\$50.00** non-refundable background screening fee per adult (18 years or older) payable in either a cashier's check or a money order payable to Soleil Property Management, Inc.

WARNING: We are not authorized to change an owner's name in our system until we have received a Warranty Deed or a copy of change from the Palm Beach Property Appraiser's website. If you do not provide this proof of change of ownership your bills will go to the previous owner and you may incur late fees, interest, and attorney fees. **You** are responsible for providing the Association with the warranty deed.

**Please mail the original to:
Soleil Property Management
P.O. Box 212964
Royal Palm Beach, FL 33421**

JUPITER INLET COVE CONDO OWNERS ASSOCIATION, INC.
COVER SHEET FOR PURCHASE APPLICATION

Address: _____ Move in Date: _____

CONTACT NUMBERS:

Owner's Name: _____ Phone: _____

Realtor's Name: _____ Phone: _____

Realtor Email: _____

Buyer Name: _____ Phone: _____

Buyer Name: _____ Phone: _____

Email Address: _____

_____ Application-Complete

_____ Background Check

_____ Copy of Sales Contract

_____ Application fee of \$150.00 (money order or cashiers check) per person for anyone 18 yrs of age or older. Payable to Soleil Property Management.

_____ Background screening fee of \$50.00 (money order or cashiers check) per person for anyone 18 yrs of age or older. Payable to Soleil Property Management.

Orientation Date: _____

Association Representative Signature: _____

Orientation completed

JUPITER INLET COVE CONDO OWNERS ASSOCIATION, INC.

Please complete all questions and fill in all blanks. If application is incomplete, this may result in your application not being processed and/or not approved. If the question does not apply, answer N/A. Print legibly or type all information.

Address of Property: _____

Owner's Name: _____ Contact Phone# _____

Date of Closing: _____ Date of Occupancy: _____

1. Name: _____ Date of Birth: _____ Social Security # _____

Spouse: _____ Date of Birth: _____ Social Security # _____

2. Please list place(s) of residence for the last two years. If additional space is needed, please attach:

A. Present Address: _____ Phone: _____
Residency Dates: From _____ to _____ Cell: _____
Name of Landlord: _____ Rent Amt: _____

B. Present Address: _____ Phone: _____
Residency Dates: From _____ to _____ Cell: _____
Name of Landlord: _____ Rent Amt: _____

3. Please list full names, Social Security number and date of birth of **all** persons that will reside at this residence:

FULL NAME:	Social Security number:	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If additional space is needed, please attach

5. Please list the make, model and tag numbers of all automobiles that will be parked at your residence

Year _____	Make _____	Model _____	Color _____	Tag No. _____
Year _____	Make _____	Model _____	Color _____	Tag No. _____
Year _____	Make _____	Model _____	Color _____	Tag No. _____
Year _____	Make _____	Model _____	Color _____	Tag No. _____

6. Drivers License number/Identification card number for ALL residence in the household. (please attach copy of license or id card)

- 1. _____ 2. _____
- 3. _____ 4. _____
- 5. _____ 6. _____
- 7. _____ 8. _____

7. Has anyone in your household ever been convicted of a felony in the past 5 years? If yes, please explain.

8. Please list employment history for the last two years. If additional space is needed, please attach.

A. Current Employer _____ Phone: _____
Address: _____
How Long: _____ Position: _____ Annual Income: _____

B. Previous Employer: _____ Phone: _____
Address: _____
How Long: _____ Position: _____ Annual Income: _____

9. Spouse's Employer: _____ Phone: _____
Address: _____
How Long: _____ Positions: _____ Annual Income: _____

10. In case of an Emergency, list contact person:

Name: _____ relationship: _____
Address: _____ Phone# _____

11. Do you receive any housing assistance? _____ If yes, Please explain: _____
_____.

Character Reference (NO Family Members)

1. Name: _____ Home Phone: _____ Work Pn: _____
Address: _____ Occupation: _____

2. Name: _____ Home Phone: _____ Work Pn: _____
Address: _____ Occupation: _____

3. Name: _____ Home Phone: _____ Work Pn: _____
Address: _____ Occupation: _____

If this application is NOT legible or is not completely and accurately filled out, Jupiter Inlet Cove Condo Owners Association, Inc. will not be liable or responsible for any Inaccurate information in the investigation and related report (should there be one) caused by such omission or illegibility.

By signing the applicant recognizes that Jupiter Inlet Cover Condo Owners Association, Inc. or their agent may investigate the information applied by the applicant, and a full disclosure or pertinent facts may be made to the Association. The Association may also require a credit report through a credit reporting agency.

Applicants Signature: _____ Date: _____

Spouse's Signature: _____ Date: _____

Owner's Signature: _____ Date: _____

RELEASE OF INFORMATION & AUTHORIZATION

DATE: _____

TO: SOLEIL PROPERTY MANAGEMENT, INC.
PO BOX 212964
ROYAL PALM BEACH, FL 33421

I GIVE MY AUTHORIZATION FOR THE ABOVE TO VERIFY INFORMATION, OBTAIN A CREDIT REPORT, CRIMINAL HISTORY REPORT, EMPLOYMENT INFORMATION ON MYSELF AND AGREE SCREENING MAY RESULT IN MY APPLICATION BEING APPROVED OR DISAPPROVED. THIS AUTHORIZATION IS GOOD FOR THIRTY (30) DAYS FROM THE DATE ABOVE.

SIGNATURE: _____

PRINT NAME: _____

DATE OF BIRTH: _____

DRIVERS LICENSE #: _____ State: _____

ADDRESS: _____

RELEASE OF INFORMATION & AUTHORIZATION

DATE: _____

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