

CLEARVIEW OAKS CONDOMINIUM ASSOCIATION, INC.
APPLICATION FOR OWNER APPROVAL

Date _____

Unit Address _____
(Building number) (street) (Unit number)

THE FOLLOWING PROCEDURE MUST BE FOLLOWED PRIOR TO A FORMAL APPROVAL BEING ISSUED ALLOWING FOR RESIDENCE IN A UNIT.

1. THIS APPLICATION MUST BE COMPLETED IN FULL. NAMES OF PERSONS TO BE NOTIFIED IN CASE OF AN EMERGENCY ARE OF THE UTMOST IMPORTANCE.

2. A SALES CONTRACT WITH SIGNATURES, FOR RETENTION BY THE ASSOCIATION OR MANAGEMENT COMPANY MUST ACCOMPANY THIS FORM WHEN PRESENTED AT INTERVIEW. PROSPECTIVE BUYERS MUST PRESENT PHOTO ID FOR THEMSELVES AND ANY OTHER PERSON TO OCCUPY THE UNIT. ID WILL BE PHOTO COPIED FOR RETENTION BY THE ASSOCIATION OR MANAGEMENT COMPANY.

3. AN APPOINTMENT FOR THE INTERVIEW CAN ONLY BE MADE AFTER THE BACKGROUND CHECK AND NO LATER THAN 10 BUSINESS DAYS PRIOR TO YOUR CLOSING DATE. PLEASE CONTACT OUR ADMINISTRATION OFFICE: MANAGEMENT & ASSOCIATES TELEPHONE # 813-433-2000.

4. INTERVIEWS ARE HELD AT 4140 55th St. N, #1113, KENNETH CITY, FL. 33709.

5. IF PROSPECTIVE BUYER HAS ANIMALS, THEY MUST BE IN COMPLIANCE WITH THE COUNTY LICENSING REQUIREMENTS. THE BUYER MUST BRING PROOF OF COMPLIANCE TO THE INTERVIEW.

REGISTRATION WILL NOT BE COMPLETED UNTIL ALL INFORMATION HAS BEEN COMPLETED.
*****COMPLETION OF THIS FORM MUST BE DONE PRIOR TO INTERVIEW*****

APPLICANT _____

TELEPHONE NO. _____ E-MAIL ADDRESS _____

NAME OF SPOUSE, 2ND OWNER OR RESIDENT

PRESENT MAILING ADDRESS _____

APPLICANTS' EMPLOYER (PRESENT OR PREVIOUS) _____

EMPLOYER ADDRESS: _____

NO. YEARS _____, POSITION _____

NAME TWO EMERGENCY REFERENCES: (CLOSEST BLOOD RELATIVES)

NAME _____ RELATIONSHIP _____ TELEPHONE NUMBER _____

ADDRESS: _____

NAME _____ RELATIONSHIP _____ TELEPHONE NUMBER _____

ADDRESS: _____

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CHARACTER REFERENCES: NAMES, ADDRESSES, AND PHONE NUMBERS

1. _____

2. _____

PETS IN RESIDENCE:

DOG/CAT: NAME _____ BREED _____ AGE _____ WEIGHT _____

SHOTS, ETC. _____

DOG/CAT: NAME _____ BREED _____ AGE _____ WEIGHT _____

SHOTS, ETC. _____

OTHER PERTINENT PET INFORMATION

Closing Agent will be: _____

Address: _____

Mailing Address until further notice:

Mailing address after closing if different than subject property:

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FOR OFFICE USE ONLY DO NOT WRITE BELOW THIS LINE

We (I) personally appeared before the below listed representatives of the Clearview Oaks Condominium Association and state that we (I) are (in fact) the only persons (person) involved in this transaction and will have the sole interest in this property located at :

and that there are no other persons who will have ownership or occupancy rights without the approval of the Board of Directors of the Clearview Oaks Condominium Association. We (I) understand that the rental or leasing of a unit in Clearview Oaks is not permitted and that the Association will be entitled to the reimbursement of reasonable legal expenses resulting from enforcement of the governing documents.

Applicant (Print) _____ Sign: _____ Date ____/____/____

Applicant (Print) _____ Sign: _____ Date ____/____/____

Interviewed By: _____ Sign : _____ Date ____/____/____

Interviewed By: _____ Sign : _____ Date ____/____/____

Circle one: **Accepted** **Conditionally Accepted *** **Not Accepted**

by : _____ Date ____/____/____

Reason for Non-acceptance _____

Clearview Oaks has been designated as housing for persons who are 55 years of age or older. It is not sufficient for the occupant/resident who is 55 years of age or older to simply spend time in the Unit; Resident Approval is conditional on having an Approved Resident who is 55 years of age or older actually occupying the Unit as their true, fixed and permanent home ("domicile").

*Additional conditions of approval: _____

Reasons for denial as an Approved Resident include, but are not limited to, the following:

- Unit must be used as a single family residence; each Unit may not have more than 2 resident occupants per bedroom.
- No lease of any Unit is permitted.
- The proposed resident poses a danger or undue risk to the health, safety or general welfare of the community due to a felony conviction within the last ten (10) years, a felony conviction for any crime for which the sanction imposed has not been completed, a felony conviction for a crime which designates the tenant or occupant a sexual predator or sexual offender, or a felony conviction for a crime related to illegal drugs.
- Inability to meet financial obligations.
- No child under age 17 may reside in a Unit.
- Unit must be occupied by at least one person who is age 55 or older.

*NOTE: meaning residence not ownership

DATE _____

CUSTOMER NUMBER _____

TENANT INFORMATION FORMI / We _____, prospective
tenant(s) / buyer(s) for the property located at _____,

Managed By: _____ Owned By: _____,

Hereby allow TENANT CHECK and or the property owner / manager to inquire into my / our credit file, criminal, and rental history as well as any other personal record, to obtain information for use in processing of this application. I / we understand that on my / our credit file it will appear the TENANT CHECK has made an inquiry. I / we cannot claim any invasion of privacy or any other claim that may arise against TENANT CHECK now or in the future.

PLEASE PRINT CLEARLY

<u>TENANT INFORMATION:</u>		<u>SPOUSE / ROOMMATE:</u>	
SINGLE _____	MARRIED _____	SINGLE _____	MARRIED _____
SOCIAL SECURITY #: _____		SOCIAL SECURITY #: _____	
FULL NAME: _____		FULL NAME: _____	
DATE OF BIRTH: _____		DATE OF BIRTH: _____	
DRIVER LICENSE #: _____		DRIVER LICENSE #: _____	
CURRENT ADDRESS: _____		CURRENT ADDRESS: _____	
_____ HOW LONG? _____		_____ HOW LONG? _____	
LANDLORD & PHONE: _____		LANDLORD & PHONE: _____	
_____		_____	
PREVIOUS ADDRESS: _____		PREVIOUS ADDRESS: _____	
_____ HOW LONG? _____		_____ HOW LONG? _____	
EMPLOYER: _____		EMPLOYER: _____	
OCCUPATION: _____		OCCUPATION: _____	
GROSS MONTHLY INCOME: _____		GROSS MONTHLY INCOME: _____	
LENGTH OF EMPLOYMENT: _____		LENGTH OF EMPLOYMENT: _____	
WORK PHONE NUMBER: _____		WORK PHONE NUMBER: _____	
HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO		HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO	
HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO		HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO	
SIGNATURE: _____		SIGNATURE: _____	
PHONE NUMBER: _____		PHONE NUMBER: _____	

TENANT CHECK HOURS OF OPERATION:
MONDAY - FRIDAY : 9:00 a.m. - 5:30 p.m.
SATURDAY : 11:00 a.m. - 4:00 p.m.
 ALL ORDERS RECEIVED AFTER 5:00 p.m. (3:30 p.m. on Sat.) WILL BE PROCESSED THE
 NEXT BUSINESS DAY

TENANT CHECK FAX #: (727) 942-6843

**IF THE WRONG SOCIAL SECURITY NUMBER IS SUBMITTED, A
 SECOND APPLICATION FEE WILL BE CHARGED TO RE-PULL THE
 REPORT.**

**A CREDIT REPORTING SERVICE PROVIDING CREDIT REPORTS FOR
 REALTORS / PROPERTY MANAGERS / APARTMENT COMPLEXES /
 MOBILE HOME PARKS / CONDOMINIUM ASSOCIATIONS / EMPLOYERS**

Apt _____ Bldg _____

Homestead/Residency - Clearview Oaks Community

Primary Applicant Name: _____

2nd Applicant Name: _____

3rd Applicant Name: _____

1. Will this be your homestead? YES or NO
2. Will you, as owner applicant, reside in the condominium? YES or NO
3. Will anyone else occupy the condominium on a temporary basis as a guest when you are not, such as:
 - A. Family Members
 - B. Friends
 - C. Relatives
 - D. Other

Circle any of the above that apply and list names of the person/persons who will be occupying the condominium and their relationship to the owner. Rentals are not permitted. Being listed on this form as a possible occupant can not be considered as approval for the below listed person(s) to reside in the unit. All residents must be individually approved by the Condo Association or it's delegate.

4. Does the occupant have a Florida Drivers License or Florida Identification Card and a Voters Card? YES or NO

THIS FORM MUST BE COMPLETED AND PRESENTED WITH THE APPLICATION FOR APPROVAL AT THE TIME OF THE INTERVIEW.

DATE _____ Bldg. Address _____ Apt. _____

APPLICANT SIGNATURE

WITNESS

APPLICANT SIGNATURE

WITNESS

APPLICANT SIGNATURE

WITNESS

Temporary is defined as 21 or less days and no more than 45 days total in a calendar year _____

To: Management and Associates
720 Brooker Creek Blvd Suite #206
Oldsmar, Florida 34677

Attention: Board of Directors - Clearview Oaks Condominium Association, Inc.

Re: _____ (the "Apartment")

In order to induce Clearview Oaks Condominium Association, Inc. to favorably approve my Application, I/we acknowledge and agree as follows:

1. Clearview Oaks is an age-restricted community under the Federal Fair Housing Act and the Florida Civil Rights Act. Accordingly:
 - a. I/we will not permit the Apartment to be occupied by anyone unless at least one person occupying the Apartment the majority of the time is at least 55 years old; and the **PROPOSED** occupant(s) is/are approved by the Association after having completed an Application for Approval and having been interviewed **PRIOR TO OCCUPYING THE APARTMENT.**
 - b. I/we will only sell, or otherwise transfer the Apartment to a single purchaser who is at least 55 years old or to two or more purchasers where at least one of those multiple purchasers is at least 55 years old.

I/we acknowledge that the Rules and Regulations are subject to change from time to time by Clearview Oaks Condominium Association, I/we agree to abide by the Rules and Regulations, as amended from time to time.

2. The letter binds me/us and me/our heirs, personal representatives, successors and assigns.

(Purchaser)

(Purchaser)

(Address)

(City, State, Zip)

**Clearview Oaks Condominium Association
Paradise Section and Clearview Oaks Condo Sections Only
Frequently Asked Questions and Answer Sheet**

Building: _____

Apartment: _____

Date: _____

1. **What are my voting rights in the Condominium Association?** The unit owners of each apartment are entitled to membership in the Association. Unit owners are allocated one vote per unit regardless of the numbers of persons owning or occupying that unit.
2. **What restrictions exist in the Condominium documents on my right to use my unit?** Condominium property can be used only for single family residence. No nuisances shall be allowed upon the property, nor use or practice which is a source of annoyance to residents of which interferes with the peaceful possession of the other condominium parcel owners. Apartment owners must abide by the Rules and Regulations adopted by the Association. No apartment may be divided or subdivided into a smaller unit, nor may any portion of a parcel be sold or otherwise transferred without first amending the Declaration of Condominium to show the change in the apartments affected. Any sale, assignment or transfer of the property must be approved by the Association. Buyer may not have a mortgage exceeding 80% of the purchase price at the time of purchase. No apartment owner may mortgage his/her apartment or any interest in it without the approval of the Association. Total mortgage debt, home equity loan or other indebtedness shall not exceed 80% of the purchase price, or evaluation, whichever is the lesser.
3. **What restrictions exist in the Condominium documents on the leasing of my unit?** There are no rentals of apartments permitted in Clearview Oaks.
4. **How much are my assessments to the Condominium Association for my unit type and when are they due?** Monthly Management fees for the current year is attached to this form (see budget) and they are due on the first of each month. The ACH Draft is on the 5th of each month. Fiscal year begins January 1st and ends December 31st.
5. **Do I have to be a member in any other Association? If so, what is the name of the Association and what are my voting rights in this Association?** No.
6. **Am I required to pay rent or land use fees for recreational or other commonly used facilities? If so, how much am I obligated to pay annually?** No, all unit owners pay their pro-rate share of the maintenance and operational expenses of the recreation and other commonly used facilities.
7. **Is the Condominium Association or other mandatory membership association involved in any court cases in which it may face liability in excess of \$100,000? If so, identify each such case.** No.

Note: The statements contained herein are only summary in nature. A prospective should refer to all references, exhibits hereto, the sales contract and the Condominium documents.

Revised 1/16