

SHAKER WOODS COMMONS CONDOMINIUM

C/O Acclaim Management

4360 W Oakland Park Blvd, Lauderdale Lakes, FL 33313 Phone: (954)640-6100 Fax: (954)640-0681

Email: info@acclaimcares.com

LEASE/PURCHASE APPLICATION

Today's Date: _____

Closing Date: _____

Address Applying for: _____

APPLICATION FEE IS \$100.00 per Applicant made PAYABLE TO: ACCLAIM MAMANGEMENT and \$50.00 made payable to SHAKER WOODS COMMONS ASSOCIATION, INC. for each applicant over the age of 18.

This is a NON-REFUNDABLE FEE

MONEY ORDERS OR CHECKS ONLY – NON-REFUNDABLE

RETURN ORIGINAL APPLICATION PACKAGE, COMPLETELY FILLED OUT, WITH PAGES IN THE FOLLOWING ORDER:

(PHOTO COPIES, SCANNED/E-MAILED COPIES OR FAXED COPIES ARE NOT ACCEPTED.)

APPLICATION CAN TAKE UP TO 30 DAYS TO PROCESS, MILITARY PERSONEL WILL BE PROCESSED IN 7 DAYS

____ MILITARY PERSONEL YES OR NO (NEED MILITARY ID FOR FASTER PROCESSING).

____ FRONT PAGE (PAGE 2) FILLED OUT COMPLETELY. NO BLANKS.

____ PURCHASE-LEASE CRITERIA MUST BE SIGNED.

____ AUTHORIZATION BACKGROUND SHEET FILLED OUT AND SIGNED BY ALL APPLICANTS.

____ BASIC RULES AND REGULATIONS.

____ PET FORM FILLED OUT AND SIGNED.

____ PROOF OF INCOME AND 2 MONTHS BANK STATEMENTS OR TAX RETURN

____ OWNER CAR INFORMATION SHEET COMPLTETY FILLED OUT AND ATTACH COPY OF CAR REGISTRATION

____ COPY OF PICTURE ID AND SOCIAL SECURITY CARD

____ LEASE OR PURCHASE CONTRACT MUST BE INCLUDED

____ INTERNATIONALS- PLEASE PROVIDE CREDIT AND BACKGROUND HISTORY. IF International Background Check is required, cost of background check will vary from country to country, as well as time to process it.

For Office Use Only:

INTERVIEW REQUIRED: _____ DATE SCHEDULED: _____

RECEIVED APPLICATION FEES FROM ALL APPLICANTS: _____

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YOU MAY NOT MOVE INTO THE UNIT UNTIL APPROVED BY THE BOARD OF DIRECTORS.

IMPORTANT

If your application is incomplete, it will be returned to you by mail along with any fee you may have submitted, as well as a list of missing items.

You may then complete the application and re-submit it together with the required fee(s).

Please provide the name and address which you would like us to use if the application is incomplete and must be returned to you.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Alt. #: _____

E-Mail: _____

PURCHASE OF: _____

If you do not fill out the information above, we will use the best address available on the application that was submitted.

All fees must be in the form of money orders or checks.

Please Note: The application process takes up to 30 days. The 30-day time period **does not** start until the application is **complete**. Incomplete paperwork will result in the delay of the application process.

****DELIVER TO: 4360 W Oakland Park Blvd. Lauderdale Lakes, FL 33313****

Acclaim Management does business in accordance with the Fair Housing Act and does not discriminate based on race, creed, color, sex, religion, national origin, age, disability, marital status, familial status, sexual orientation, or any other protected basis.

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

SHAKER WOODS COMMONS CONDOMINIUM

PURCHASE / LEASE CRITERIA

APPLICATION PROCESS: Please allow thirty (30) business days for your application to be approved. Applicants must be 18 years of age or older to apply for residency. A valid driver's license or a government issued photo ID is required. Military personnel will be processed in 7 days. Will need military ID for faster processing. Interview will be required for all Buyers on application. **Money orders or checks only. NON-REFUNDABLE.**

EMPLOYMENT HISTORY: You must provide complete employment information. New hires may be required to provide a new hire letter on company letterhead stating new hire date, job title and income. Self-employed persons will be required to provide a recent personal tax return or a letter from the company accountant stating annual income. Corporate tax returns are not acceptable.

PETS: A weight limit not to exceed 25lbs each.

VEHICLES/TOWING: No commercial vehicles, trucks, boats, trailers, motor homes, mobile homes, campers, etc. will be permitted on the property. All vehicles must have current license tags and be in operable condition. All vehicles must be in their designated parking spaces. Guest parking shall be on the first come-first served basis.

CREDIT: Credit History should be favorable. Must have a score of 650 FICO. Poor credit after bankruptcy is not acceptable.

CRIMINAL HISTORY: Persons convicted of a felony, or misdemeanors will be Evaluated by the Board of Directors and could be grounds for rejection.

SOCIAL SECURITY NUMBERS: Persons who do not have social security numbers must provide a Visa, Visa Waiver or Resident Alien Card, also must provide an international background check.

Any applicant who falsifies information on his or her application will not be accepted for residency or may be subject to immediate lease or termination. SHAKER WOODS COMMONS CONDOMINIUM, ASSOCIATION does business in accordance with the Equal Housing Opportunities Law and does not discriminate against any person because of race, color, religion, gender, handicap, familial status or national origin.

Applicant acknowledges reading and understanding the above criteria and is aware that their application will be submitted for a background check.

Proposed New Address: _____
Unit: _____ **City:** _____ **State:** _____ **Zip:** _____

Applicant

Full Name: _____ Date of Birth: _____ Social Security#: _____
Current Address: _____ City/State: _____ Zip: _____
Phone #: _____ E-Mail Address: _____
Dates at Residence: _____ to _____
Reason for leaving: _____
Occupation: _____
Nature of Business: _____
Employer: _____
Address of employer: _____
Position Held: _____ Period of employment: _____ to _____
Prior employer and position if less than 3 years: _____
Income estimate for this year: _____ Actual income last year: _____
Educational Background: _____
Driver License #: _____

Co-Applicant

Full Name: _____ Date of Birth: _____ Social Security#: _____
Current Address: _____ City/State: _____ Zip: _____
Phone #: _____ E-Mail Address: _____
Dates at Residence: _____ to _____
Reason for leaving: _____
Occupation: _____
Nature of Business: _____
Employer: _____
Address of employer: _____
Position Held: _____ Period of employment: _____ to _____
Prior employer and position if less than 3 years: _____
Income estimate for this year: _____ Actual income last year: _____
Educational Background: _____
Driver License #: _____

Additional Information

Names of persons who will reside in Apartment:

Name: _____ Relationship: _____ AGE: _____

Is this person: **Residing/Renting?**

Name: _____ Relationship: _____ AGE: _____

Is this person: **Residing/Renting?**

Name: _____ Relationship: _____ AGE: _____

Is this person: **Residing/Renting?**

Name: _____ Relationship: _____ AGE: _____

Is this person: **Residing/Renting?**

Names of anyone in the building known to Applicant:

Personal References**Applicant**

1. Name: _____ Address: _____
Phone #: _____ Cell # _____ Work # _____
2. Name: _____ Address: _____
Phone #: _____ Cell # _____ Work # _____

Co-Applicant

1. Name: _____ Address: _____
Phone #: _____ Cell # _____ Work # _____
2. Name: _____ Address: _____
Phone #: _____ Cell # _____ Work # _____

Emergency Contact

Name: _____ Relationship: _____ Do they have a Key: _____
Address: _____ City/State _____ Zip _____
Phone #: _____ Cell # _____ Work # _____

Business and Professional References**Applicant**

1. Name: _____ Address: _____
Phone #: _____ Cell # _____ Work # _____
2. Name: _____ Address: _____
Phone #: _____ Cell # _____ Work # _____

Name of Realtor, Title Company, or Attorney who is handling this transaction:

Name: _____ Phone #: _____ Cell # _____
Address: _____ Email _____

I DECLARE THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT. APPLICANT AGREES TO OBTAIN THE HOA ASSOCIATION DOCUMENTS BOOK FROM THE OWNER / SELLER, REVIEW IT AND AGREE TO COMPLY WITH ALL THE TERMS OF IT. **SUBLEASING IS NOT PERMITTED**/LEASING WITH OPTION TO PURCHASE' IS NOT PERMITTED. LEASE RENEWALS MUST BE MADE BEFORE CURRENT LEASE EXPIRES TO AVOID ADDITIONAL APPLICATION FEE. BUYER BECOMES RESPONSIBLE FOR ANY AND ALL OUTSTANDING BALANCES AFTER THE CLOSING

Signature of Applicant: _____ Date: _____

Signature of Co-Applicant: _____ Date: _____

Internal use

Owner Currently Owes: Amount \$ _____ as of ____/____/____ By _____

Circle one: _____ Approved _____ Disapproved _____

Reason of Disapproval: _____

Print Name and Position _____

Signature _____

BASIC RULES AND REGULATIONS ACKNOWLEDGEMENT

SHAKER WOODS COMMONS CONDOMINIUM

Address: _____

I / WE HAVE REVIEWED THE CONDOMINIUM DOCUMENTS AND FULLY UNDERSTAND EACH OF THE RULES AND REGULATIONS AND WILL ABIDE BY THEM WHILE LIVING SHAKERS WOODS COMMONS CONDOMINIUM.

I / WE FURTHER UNDERSTAND THAT VIOLATING THE RULES AND REGULATIONS COULD RESULT IN RECEIVING A LETTER OR A FINE FROM THE ASSOCIATION.

I / WE ARE AWARE THAT THE HOURS OF MOVE IN ARE 9:00AM – 5:00PM MONDAY – FRIDAY, 8:00AM – 8:00PM SATURDAY AND SUNDAY.

I/WE ARE AWARE ALL VEHICLES ON THE PROPERTY MUST HAVE CURRENT LICENSE TAGS AND BE IN AN OPERABLE CONDITION. IF YOU ARE PARKED IN ANOTHER OWNER ASSIGNED PARKING SPACE, CARS WILL BE TOWED AT OWNER'S EXPENSE.

I / WE ARE AWARE THAT ASSESSMENTS ARE DUE IN FULL ON THE 1ST DAY OF EACH MONTH OR IN ACCORDANCE WITH THE PROPERTY DOCUMENTS. ANY PAYMENTS RECEIVED TEN (10) DAYS AFTER THE DUE DATE WILL BE ASSESSED A LATE FEE.

_____ SIGNATURE	_____ PRINT NAME
SIGNED ON THIS DATE: _____	

_____ SIGNATURE	_____ PRINT NAME
SIGNED ON THIS DATE: _____	

**A COPY OF RULES AND REGULATIONS WAS PROVIDED TO
APPLICANTS**

Pet Registration Form

SHAKER WOODS COMMONS CONDOMINIUM tenant/owners agree to the pet policies as stated in the condominium documents.

Owner has read and agreed to follow the rules and regulations with regards to pets:

Pets must be **25** pounds or less. Owner must provide a picture of the pet(s) that will be residing in the Unit. Pets shall not be allowed on or about the Common Elements except on a leash of no longer than six (6) feet or when being carried by the owner. No pets shall be left unattended in or on the balcony, patio or other similar area even if the area has been enclosed. No reptiles, wildlife, amphibians, poultry or livestock shall be raised, bred or kept on SHAKER WOODS COMMONS CONDOMINIUM Property. No pets or other animals shall cause or be the source of annoyance, nuisance or disturbance to any other owner or occupant. Each pet owner shall be responsible for the removal and disposal of pet's feces or waste. The ability to have and keep a pet is a privilege, not a right, and the Board is empowered to order and enforce the removal of any animal or pet which becomes a source of annoyance to other residents of SHAKER WOODS COMMONS CONDOMINIUM or in any way causes any damage to the property. When notice of removal of any pet is given by the Board, the pet shall be removed within forty-eight (48) hours of the given notice. Unit Owners may provide in a lease that tenants shall not be permitted to keep or have pets of any kind. Each Owner shall be responsible for the activities of its pet. The pet restrictions provided for herein apply to pets visiting a Unit and pets permanently housed in a Unit.

The association agrees to permit owner to keep the pet described below:

Type of pet: _____ Breed: _____
Name: _____ Age: _____ Weight: _____

Color/Description: _____

Type of pet: _____ Breed: _____
Name: _____ Age: _____ Weight: _____

Color/Description: _____

Owner has provided evidence in the form of a receipt or other written verification from the veterinarian of the following documents:

_____ Rabies Vaccination
_____ All Vaccinations
_____ Tag Number

Print Name

Signature

Date

Car Information Sheet

Date: _____

Unit address: _____

City: _____ State: _____ Zip: _____

Applicant #1: _____

Phone #: _____ Alt #: _____

Email: _____

Make and model of Car: _____

Year: _____ Color: _____ Tag #: _____

Applicant #2: _____

Phone #: _____ Alt #: _____

Email: _____

Make and model of Car: _____

Year: _____ Color: _____ Tag #: _____

**** OWNERS AND TENANTS MUST OBTAIN CAR DECALS****

PICTURE ID AND SOCIAL SECURITY CARD **HERE**

PICTURE ID

SOCIAL SECURITY CARD

COPY OF LEASE/ PURCHASE CONTRACT
FOLLOW THIS PAGE