



# Royal Poinciana Condominium Association, Inc.

**A NON-REFUNDABLE application fee & background check fee of \$100 per person is required to be paid in the form of a money order or certified bank check. New owner(s) / tenant(s) must be approved by the Board prior to sale or lease. \*\*REQUIRES A 650 OR HIGHER CREDIT SCORE PER ADULT RESIDENT\*\***

## NEW OWNER(S)/TENANT(S) APPLICATION

**PRINT OR TYPE** PURCHASE \_\_\_\_\_ LEASE \_\_\_\_\_ DATE: \_\_\_\_\_

APT. NO. \_\_\_\_\_ ADDRESS \_\_\_\_\_

DESIRED DATE OF OCCUPANCY: \_\_\_\_\_ HOW LONG? \_\_\_\_\_

NAME \_\_\_\_\_ BIRTH DATE \_\_\_\_\_ SOCIAL SECURITY \_\_\_\_\_  
(PASSPORT, ALLIEN CARD)

NAME \_\_\_\_\_ BIRTH DATE \_\_\_\_\_ SOCIAL SECURITY \_\_\_\_\_  
(PASSPORT, ALLIEN CARD)

HOME PHONE \_\_\_\_\_ OFFICE PHONE \_\_\_\_\_

CELL PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

SINGLE     MARRIED     SIGNIFICANT OTHER     SEP.     DIV     WIDOWED

**NO. OF PEOPLE WHO WILL LIVE HERE:** ADULTS (OVER 18) \_\_\_\_\_ CHILDREN (OVER 18) \_\_\_\_\_ CHILDREN (UNDER 18) \_\_\_\_\_

OCCUPANTS OR FREQUENT VISITORS	DOB	RELATIONSHIP

WILL THIS BE YOUR YEAR-ROUND ADDRESS?  YES  NO IF NO PLEASE PROVIDE ALTERNATIVE ADDRESS AND ESTIMATED PERIODS OF RESIDENCY

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_  
RESIDENCY PERIOD

**NAME OF PETS:** BREED \_\_\_\_\_ COLOR \_\_\_\_\_ WEIGHT \_\_\_\_\_

**\*\* NO VICIOUS BREEDS\*\*** BREED \_\_\_\_\_ COLOR \_\_\_\_\_ WEIGHT \_\_\_\_\_

DRIVERS LICENSE #1 \_\_\_\_\_ #2 \_\_\_\_\_

NO. OF CARS YOU WILL PARK AT THIS ADDRESS: \_\_\_\_\_ ARE ANY COMMERCIAL VEHICLES?  YES  NO

MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ YEAR \_\_\_\_\_ COLOR \_\_\_\_\_ PLATE \_\_\_\_\_ STATE \_\_\_\_\_

MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ YEAR \_\_\_\_\_ COLOR \_\_\_\_\_ PLATE \_\_\_\_\_ STATE \_\_\_\_\_

MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ YEAR \_\_\_\_\_ COLOR \_\_\_\_\_ PLATE \_\_\_\_\_ STATE \_\_\_\_\_

IN CASE OF EMERGENCY, PERSON TO BE NOTIFIED: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE # \_\_\_\_\_



# Royal Poinciana Condominium Association, Inc.

**RESIDENTIAL HISTORY:**  
**PRINT OR TYPE**

1 Present address \_\_\_\_\_ How long \_\_\_\_\_  
 \_\_\_\_\_ zip \_\_\_\_\_ Phone # \_\_\_\_\_  
 Landlord/Lender \_\_\_\_\_ Phone # \_\_\_\_\_  
 Address \_\_\_\_\_ Mortgage # \_\_\_\_\_

2 Prior address #1 \_\_\_\_\_ How long \_\_\_\_\_  
 \_\_\_\_\_ zip \_\_\_\_\_ Phone # \_\_\_\_\_  
 Landlord/Lender \_\_\_\_\_ Phone # \_\_\_\_\_  
 Address \_\_\_\_\_ Mortgage # \_\_\_\_\_

3 Prior address #2 \_\_\_\_\_ How long \_\_\_\_\_  
 \_\_\_\_\_ zip \_\_\_\_\_ Phone # \_\_\_\_\_

**EMPLOYMENT REFERENCES**

**Employed by** \_\_\_\_\_ Phone # \_\_\_\_\_

1 Address \_\_\_\_\_  
 Position \_\_\_\_\_ How long \_\_\_\_\_ Monthly Income \_\_\_\_\_

2 Previous Employer \_\_\_\_\_ Phone # \_\_\_\_\_  
 Address \_\_\_\_\_  
 Position \_\_\_\_\_ How long \_\_\_\_\_ Monthly Income \_\_\_\_\_

3 Spouse's Employed or retired from) \_\_\_\_\_ Phone # \_\_\_\_\_  
 Address \_\_\_\_\_  
 Position \_\_\_\_\_ How long \_\_\_\_\_ Monthly Income \_\_\_\_\_  
 Spouse's Prev Employer \_\_\_\_\_ Phone # \_\_\_\_\_  
 Address \_\_\_\_\_  
 Position \_\_\_\_\_ How long \_\_\_\_\_ Monthly Income \_\_\_\_\_

How you ever seasonally resided in Florida before? [ ] Yes [ ] No. If yes, please state name, address, and dates of residency

Have you or any proposed occupant ever been convicted of or pled to a crime? [ ] Yes [ ] No. If yes, please state date(s), charge(s).

Disposition(s) and location(s) \_\_\_\_\_

**YOUR APPLICATION FOR RESIDENCY WILL BE REJECTED IF YOU: ARE LISTED AS A SEXUAL PREDATOR OR OFFENDER; HAVE EVER BEEN CONVICTED OF A FELONY; HAVE FELONY CHARGES PENDING; OR HAVE PLED "GUILTY" OR "NO CONTEST" TO ANY FELONY, REGARDLES OF OUTCOME.**



# Royal Poinciana Condominium Association, Inc.

PRINT OR TYPE

**BANK REFERENCES**

1 Bank Name \_\_\_\_\_ Phone # \_\_\_\_\_  
 Address \_\_\_\_\_ Officer's Name \_\_\_\_\_

2 Bank Name \_\_\_\_\_ Phone # \_\_\_\_\_  
 Address \_\_\_\_\_ Officer's Name \_\_\_\_\_

3 Bank Name \_\_\_\_\_ Phone # \_\_\_\_\_  
 Address \_\_\_\_\_ Officer's Name \_\_\_\_\_

**CHARACTER REFERENCES**

1 \_\_\_\_\_ Home Phone \_\_\_\_\_  
 Address \_\_\_\_\_

2 \_\_\_\_\_ Home Phone \_\_\_\_\_  
 Address \_\_\_\_\_

3 \_\_\_\_\_ Home Phone \_\_\_\_\_  
 Address \_\_\_\_\_

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_\_

**Return this form along with \$100 fee per person to Royal Poinciana, 1275 SW 46th Avenue, Clubhouse, Pompano Beach, FL 33069 for processing and approval. APPROVAL MUST BE ISSUED PRIOR TO RESIDENCY.**

(Association Use Only)

( ) APPROVED ( ) NOT APPROVED ( ) INCOMPLETE \*Form must be completed entirely & re-submitted for approval

PRINT NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

TITLE \_\_\_\_\_ OF ROYAL POINCIANA CONDOMINIUM ASSOCIATION, INC.



# Royal Poinciana Condominium Association, Inc.

## EMPLOYMENT VERIFICATION

TO: (Name and address of employer)

Date: \_\_\_\_\_

Phone # \_\_\_\_\_

Fax # \_\_\_\_\_

RE: \_\_\_\_\_

Applicant / Tenant Name

Social Security Number

Unit# (if assigned)

I hereby authorize release of my employment information.

\_\_\_\_\_  
Signature Owner Applicant Tenant

\_\_\_\_\_  
Date

I hereby authorize Royal Poinciana Condominium to conduct employment verification for rental purposes. Additionally, I hold both Royal Poinciana Condominium and my employer harmless for any claims against them for filling out this form, commenting on the form, or any discussion regarding this form and its subject matter.

THIS SECTION TO BE COMPLETED BY EMPLOYER

Employee name: \_\_\_\_\_

Job Title: \_\_\_\_\_

Presently Employed: Yes \_\_\_\_\_ Date First Employed \_\_\_\_\_

No \_\_\_\_\_ Last Day of Employment \_\_\_\_\_

Current Wages/Salary: \$ \_\_\_\_\_ (check-one)

( ) hourly ( ) semi-monthly ( ) monthly ( ) yearly ( ) other \_\_\_\_\_

If the employee's work is seasonal or sporadic, please indicate the layoff period(s):

Additional remarks: \_\_\_\_\_

\_\_\_\_\_  
Employer's Signature

\_\_\_\_\_  
Employer's Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employer's (Company) Name and Address

\_\_\_\_\_  
Phone #

\_\_\_\_\_  
Fax #

\_\_\_\_\_  
E-mail





Royal Poinciana Condominium Association, Inc.

**DECLARATION OF UNIT OCCUPANCY**

I, \_\_\_\_\_, PROSPECT TENANT OF  
UNIT \_\_\_\_\_ WOULD LIKE TO DECLARE THAT DURING MY LEASE TERM  
THE PEOPLE TO OCCUPY THE UNIT BESIDES MYSELF, WHICH ARE INCLUDED IN MY  
APPLICATION WILL BE:

- \_\_\_\_\_ ( ) ADULT ( ) CHILD
- \_\_\_\_\_ ( ) ADULT ( ) CHILD
- \_\_\_\_\_ ( ) ADULT ( ) CHILD
- \_\_\_\_\_ ( ) ADULT ( ) CHILD

PLEASE BE REMINDED THAT ANYONE LIVING IN THE COMMUNITY MORE THAN 14  
DAYS WITHOUT BEING REGISTERED AT THE OFFICE WILL RESULT IN THE  
TERMINATION OF YOUR LEASE AGREEMENT AND RESIDENTIAL RIGHTS.

**I ACKNOWLEDGE THAT I HAVE READ AND AGREE TO THE ABOVE  
TERMS AND CONDITIONS OF THIS DECLARATION, WITH FULL  
KNOWLEDGE OF ITS EFFECT.**

TENANT \_\_\_\_\_

DATE \_\_\_\_\_



**OWNERS MAINTENANCE OBLIGATION -  
TENANTS PAYMENT OF RENT TO ASSOCIATION**

This notice is to notify you that effective July 1, 2010 a new Florida Senate Bill 1196, Chapter 718.116 dealing with Condominiums was passed regarding Owners that are delinquent in their Maintenance Obligation and have Tenants renting their units:

Section 718.116(11) - Tenants to Pay Rent to Association

1. If the unit is occupied by a tenant and the unit owner is delinquent in paying any monetary obligation due to the association, the association may make a written demand that the tenant pay the future monetary obligations related to the condominium unit to the association, and the tenant must make such payment. The demand is continuing in nature and, upon demand, the tenant must pay the monetary obligations to the association until the association releases the tenant or the tenant discontinues tenancy in the unit. The association must mail written notice to the unit owner of the association's demand that the tenant make payments to the association. The association shall upon request, provide the tenant with written receipts for payments made. **A tenant who acts in good faith in response to a written demand from an association is immune from any claim from the unit owner.**

2. The association may issue notices under s. 83.56 and may sue for eviction under ss. 83.59-83.625 as if the association were a property owner under part II of chapter 83 if the tenant fails to pay a required payment to the association. However, the association is not otherwise considered a property owner under chapter 83 and specifically has no duties under s. 83.51.

**I HAVE READ AND UNDERSTOOD THAT IN THE EVENT THAT MY UNIT IS  
DELINQUENT IN PAYING ANY MONETARY OBLIGATION DUE TO THE  
ASSOCIATION, AND IN RESPONSE TO A WRITTEN DEMAND BY THE  
ASSOCIATION, RENT PAYMENTS WILL BE DONE TO THE ASSOCIATION UNTIL  
MONETARY OBLIGATION IS MET DURING THE TERMS OF THE LEASE.**

---

Owner or Owner's Agent

Date

---

Tenant

Date



Royal Poinciana Condominium Association, Inc.

## OWNERS MAINTENANCE INFORMATION

Please provide Royal Poinciana's office with the name and phone number of your Maintenance Company or Property Manager/Emergency for your unit. Repairs inside the unit are the owner's responsibility.

**We will not be able to approve any applications without this information.**

ROYAL POINCIANA UNIT #: \_\_\_\_\_

MANAGEMENT CO: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

PROPERTY MANAGER/EMERGENCY: \_\_\_\_\_

PM / EMERGENCY PHONE NUMBER: \_\_\_\_\_

\_\_\_\_\_  
OWNERS SIGNATURE