

**SNUG HARBOR GARDENS CONDOMINIUM ASSOCIATION, INC.
631 Snug Harbor Drive, Boynton Beach, FL 33435**

APPLICATION FOR PURCHASE

ALL INFORMATION AND DOCUMENTATION GIVEN ON THIS APPLICATION IS SUBJECT TO INVESTIGATION AND VERIFICATION. APPLICANT (S) SPECIFICALLY AUTHORIZE SNUG HARBOR GARDENS CONDOMINIUM ASSOCIATION, INC., IT'S DIRECTORS, OFFICERS, EMPLOYEES, ATTORNEYS AND/OR AGENTS TO CONDUCT SUCH INVESTIGATIONS AND VERIFICATION AS THEY MAY DEEM NECESSARY OR APPROPRIATE. SUBMISSION OF INACCURATE, INCOMPLETE OR INCORRECT INFORMATION MAY RESULT IN DELAY OR DENIAL OF YOUR APPLICATION AND MAY ALSO BE CONSIDERED A MATERIAL VIOLATION OF ANY LEASE AGREEMENT OR OWNERSHIP TRANSFER APPROVED IN RELIANCE UPON SUCH INFORMATION.

THE SCREENING FEE IS \$100.00 AND MUST ACCOMPANY COMPLETED APPLICATION. A COPY OF THE PURCHASE AND SALE AGREEMENT MUST BE PROVIDED AT TIME OF SCREENING. PLEASE PROVIDE A COPY OF DRIVERS LICENSE OR OTHER PROOF OF AGE WITH APPLICATION.

Applicant (ONE) Tel. # _____

Applicant (TWO) Tel. # _____

DATE APPLICATION SUBMITTED

PROPERTY ADDRESS, BUILDING, UNIT.

CURRENT OWNERS NAME (S) Tel. # _____

ANTICIPATED CLOSING DATE OR LEASE COMMENCEMENT PAGE 1

SNUG HARBOR GARDENS CONDOMINIUM ASSOCIATION, INC.

PERSONAL INFORMATION: (If more than two residents attach additional information to this sheet.)

NAME (S) 1: _____ 2: _____

DATE (S) OF BIRTH 1: _____ 2: _____

SOCIAL SECURITY NUMBER (S) 1: _____ 2: _____

CURRENT ADDRESS: _____

DRIVERS LICENSE (S)
NUMBER AND STATE: 1: _____
2: _____

IF APPLICABLE PROVIDE NAME (S) AND YOUR RELATIONSHIP TO ANY CHILDREN UNDER THE AGE OF 18 WHO WILL ALSO OCCUPY THE UNIT. (use additional paper and attach IDENTIFY TWO PERSONAL REFERENCES WHO ARE NOT RELATED, AND HAVE KNOWN YOU FOR AT LEAST ONE YEAR:

NAME: _____ TELEPHONE NUMBER: _____

NAME: _____ TELEPHONE NUMBER: _____

DO YOU INTEND TO MAKE THIS UNIT YOUR FULL TIME RESIDENCE?
YES ___ NO ___

DO YOU INTEND TO LEASE THIS UNIT? YES ___ NO ___

PAGE 2.

**SNUG HARBOR GARDENS CONDOMINIUM
ASSOCIATION, INC.**

PERSONAL INFORMATION CONTINUED

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES__ NO__
If yes, please provide dates and details. _____

HAVE YOU EVER FILED FOR BANKRUPTCY? YES__ NO__
If yes, please provide dates and details. _____

RESIDENTIAL HISTORY:

HOW LONG AT CURRENT ADDRESS? _____

OWN__ RENT__

**OWNERS PLEASE PROVIDE; NAME , ADDRESS AND PHONE NUMBER OF
MORTGAGE HOLDER**

**RENTERS, PLEASE PROVIDE NAME, ADDRESS AND PHONE NUMBER OF
LANDLORD.**

**IF LESS THAN 5 YEARS AT CURRENT ADDRESS PLEASE PROVIDE PREVIOUS
ADDRESS, AND LENGTH OF RESIDENCE.**

SNUG HARBOR GARDENS CONDOMINIUM ASSOCIATION, INC.

**TO BE READ AND AGREED TO BY THE PROSPECTIVE BUYER
or LESSEE**

**I (WE) THE UNDERSIGNED, HAVE BEEN INFORMED AND
AGREE TO THE FOLLOWING:**

- 1: SNUG HARBOR GARDENS CONDOMINIUM ASSOCIATION,
INC. IS A 55 YEARS AND OLDER COMMUNITY.**
- 2: IF I (WE) INTEND TO MOVE OR PLACE OUR UNIT UP FOR
SALE I (WE) MUST FILL OUT THE INTENT TO SELL FORM.
(Declaration of Condominium-Section XI, Article A.)**
- 3: I (WE) AGREE NOT TO SUBLET THE UNIT.**
- 4: I (WE) UNDERSTAND THAT THE UNIT MUST BE OWNED FOR
A PERIOD OF ONE YEAR BEFORE RENTING.**
- 5: A LEASE MAY NOT BE FOR A PERIOD OF LESS THAN
THREE(3) MONTHS NOR MORE THAN 7 MONTHS DURATION.**
- 6: A UNIT MAY NOT BE LEASED MORE THAN ONCE IN A
CALENDAR YEAR.**
- 7: NO TRUCKS, CAMPERS, BOATS, TRAILERS, CONVERSION
VANS AND MOTOR BIKES ALLOWED ON SNUG HARBOR
GARDENS PROPERTY.**
- 8: NO ANIMALS OF ANY SIZE OR BREED ARE PERMITTED.**

**I (WE) HAVE READ AND AGREE TO ABIDE BY THE RULES AND
REGULATIONS OF THE ASSOCIATION.**

SIGNED BY: _____

DATE: _____

PAGE 5

SNUG HARBOR GARDENS CONDOMINIUM ASSOCIATION, INC.

I (WE) HEREBY ATTEST AND AFFIRM THAT THE INFORMATION GIVEN ON THIS APPLICATION FOR RESIDENCY IS TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

APPLICANT ONE

APPLICANT TWO

DATE: _____

DATE: _____

PAGE 5

SNUG HARBOR GARDENS CONDOMINIUM ASSOCIATION, INC.

EMPLOYMENT HISTORY:

LENGTH OF EMPLOYMENT: _____
ANNUAL INCOME: _____

**IF LESS THAN 5 YEARS EMPLOYMENT PLEASE PROVIDE PREVIOUS
EMPLOYMENT INFORMATION.**

COMPANY _____
TITLE/POSITION _____
LENGTH OF EMPLOYMENT _____

REFERENCES

PROVIDE ONE FINANCIAL REFERENCE: (BANKER, ACCOUNTANT, ETC.)

NAME _____
COMPANY _____
ADDRESS _____
TELEPHONE NUMBER _____

**PROVIDE ONE PERSONAL REFERENCE: (NOT A RELATIVE, WHO HAS KNOWN
YOU FOR MORE THAN 2 YEARS.)**

NAME _____
ADDRESS _____
TELEPHONE NUMBER _____

SNUG HARBOR GARDENS CONDOMINIUM ASSOCIATION, INC.

E-Mail Address: _____

ON PREMISE VEHICLES:

Vehicle One:

Make,	Model,	Year
PLATE NUMBER		STATE

Vehicle Two:

Make,	Model,	Year
PLATE NUMBER		STATE

EMERGENCY CONTACT INFORMATION:

NAME: _____

TELEPHONE NUMBER: _____

RELATIONSHIP: _____

I (WE) HEREBY ATTEST AND AFFIRM THAT THE INFORMATION GIVEN ON THIS APPLICATION FOR RESIDENCY IS TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

Applicant One _____ **Applicant Two** _____
Date: _____ **Date:** _____