REQUEST FOR APPROVAL – LEASE

<u>ALL</u> the following information must be submitted to the Board of Directors for consideration **BEFORE APPROVAL IS GRANTED** for the lease of your property.

- □ A \$100.00 non-refundable screening fee (varies per country) <u>PER APPLICANT</u> from the prospective Tenant or Owner in the form of a Money Order or Cashier's Check only. Please make payable to "<u>Portofino Bay</u> <u>POA</u>". Personal checks or cash will not be accepted.
- **Request for Approval Cover Page** (included in this packet)
- □ A copy of the fully executed "Application for Lease / Residency" (included in this packet. Please note that if there are any questions <u>not answered or left blank</u> on the application, the application will be <u>returned</u> and <u>not</u> processed.
- □ A copy of the Authorization for Release of Banking, Residence, Employment, Credit, and Police Information (included in this packet)
- □ A copy of Receipt for Rules and Regulations (included in this packet)
- □ A complete copy of the fully executed Lease (which shall be expressly subject to the approval of the Association).
- □ A Security Deposit in the amount of \$500.00 made by the Owner not the Prospective Tenant. This security Deposit will be refundable to the owner upon the terms of Portofino Bay POA Governing Documents.
- □ Driver's License or Picture ID of <u>ALL</u> applicants & occupants over 16 years of age. Please include a copy of Vehicle Registration.
- Please note that all Association dues must be paid when leasing the unit and all Violations cured. Approval will not be granted if any money is owed at the time of approval and / or any violations are not cured.
- □ All Keys and "Rules and Regulations" are the responsibility of the landlord.

Applications must be submitted to the Board of Directors not less than <u>thirty (30) days</u> before the lease term. Please note that **Occupancy prior to Approval is prohibited**.

Applications along with the above requested information must be mailed to: Harbor Management Services 15600 sw 288 st, #406 Homestead, FL 33033

INCOMPLETE APPLICATION PACKAGES WILL NOT BE ACCEPTED NO FAXES WILL BE ACCEPTED AND / OR PROCESSED

Please note that Harbor Management Services will not be able to RUSH the process. We ask that you not call us to request that the process be "rushed". We will reply to you via U.S. Postal Service

and we may also contact you via telephone when the application has been processed by the Board of Directors.

We appreciate your cooperation in complying with Portofino Bay POA Governing Documents. If you should have any questions or concerns, please feel free to call Harbor Management Services at 305-246-5867 or you may email your questions or concerns to frontdesk@harborms.com.

REQUEST FOR APPROVAL OF LEASE COVER PAGE

The following information should be filled out by the Property Owner. Please complete all parts of this page. Please mark "N/A" for all parts that are Non-Applicable.

Property Owner's Information

Name of Property Owner:	5.
Property Address:	(Homestead, FL 33033)
Portofino Bay POA Account #:	
Property Owner's Phone #:	
Realtor's Information (if applicable)	5
Name of Realtor:	
Company Name:	
Realtor's Phone #:	
Prospective Tenant's Information	
Prospective Tenant's Name(s):	
Prospective Tenant's Phone No:	
Lease Term:	_to

APPLICATION FOR LEASE / RESIDENCY

Applicant:							
	(Lasi	t)	((First)	(M	liddle)	
Date of Birth:			S	ocial Securi	ty No:		
Personal Description:						ν.	
2	Ht.	Wt. Hai	ir Color	Driver's l	License #	S	tate
Present Address	S (NOT the add	lress you are movin	ig to):				
					(Street)		(Apt)
(City)	(State)	(Zip Code)	(Hom	e telephone)	🗆 Own	□ Rent	(Since)
Landlord/Mortg	gage Co.:		53				
		(Name	e)	×.		(Ad	dress)
(City)	(State)	(Zip Code)		(Telephone)	Own	Rent	(Since)
Previous Addre	SS					_	
		(S	Street)				(Apt)
(City)	(State)	(Zip Code)	(Te	lephone)		Rent	(Since)
Landlord/Mortg	gage Co.: _			<u></u>			
		(Name))		_	(Ad	ldress)
(City)	(State)	(Zip Code)	. (Telephone)	Own	Rent	(Since)
Total Number o to occupy prem							
Have you ever l	been evicted	d? from any le	ased pre	emises? Yes	s / No		
Rent Amount:							
In case of Emer	gency, noti	fy:			Telephor	ne:	
Vehicle 1:		ake Mod	el	Color		Tag Nu	mber:
Vehicle 2:			01	COIOI		Τρσ Νυ	imber:
		fake Mod	el	Color		- "B 110	

Present Emp	oloyer:					
(Name)			(Business Address)			
(City)	(State)	(Zip Code)	(Telephone)	(Supervisor)		
(Monthly Incon		nce)				
Previous En	nplover:					
		(Name)	<u> </u>	(Business Address)		
(City)	(State)	(Zip Code)	(Telephone)	(Supervisor)		
(Monthly Incor	me) (S	ince)				
Co-Applica	nt:	(Last)				
			(First			
Date of Birtl	h:		Social Sec	curity No.:		
Co-Applicar Description:						
-		Ht. Wt. I	Hair Color Driver	's License # State		
Is Co-Applic	cant snouse	? ¬Yes ¬]	No Specify Re	lationship:		
ib ee rippin	ount spouse		speeny re			
Co Amplican	t'a Dragant	Engelsyan		-24		
Co-Applicar		-				
	(Name)	(Business	Address)		
(City)	(State)	(Zip Code)	(Telephone)	(Supervisor)		
() (
(Monthly Incom	,	ince)				
Co-Applican	it's Previou	s Employer:	(Name)	(Business Address)		
			(rame)	(Business Autress)		
(City)	(State)	(Zip Code)	(Telephone)	(Supervisor)		
(Monthly Incom	ne)	(Since)				

Children:	Pets:							
	(How many and their	ages)	(Description an	(Description and approximate weight)				
Bank								
Reference:	4							
	(Name)	(Acct. # - Last 4 Nur	mbers)	(Phone #)				
	(Location)	(City	y) (State)					
Credit Card								
Reference:								
	(Name)	(Acct. # - Last 4 Number	rs)	(Phone #)				
	(Location)	(City	y)	(State)				
Have you ever	been arrested for a misde	emeanor or felony?	Applicant	Co-Applicant				
Explain:			Yes No	Yes 🛛 No				
Have you ever	been convicted for a mis	demeanor or felony?	Applicant	Co-Applicant				
Explain:			Yes No	🛛 Yes 🗌 No				

CORRECTION INFORMATION – Applicant represents that all of the above statements are true and complete, and hereby, authorizes verification of the above information, references and credit records in addition to the foregoing, applicant(s) has paid to Portofino Bay POA the sum of \$100.00 as a nonrefundable fee for Association's costs and right of occupancy and or forfeiture of deposits and may constitute a criminal offense under the laws of this State. Furthermore, I understand that an investigative consumer report including information about my character, general reputation, personal characteristics, mode of living, and all public record information including criminal records may be made. I understand that a written request for the nature and scope of the investigation if made within a reasonable period may be made. I understand that misrepresentation of the above information will void my lease/rental agreement and be grounds for immediate eviction with loss of all deposits. I authorize verification of this information by the Landlord or his agent

EQUAL CREDIT OPPORTUNITY ACT - The Federal ECOA prohibits from discriminating against credit applicants based on sex or marital status. The Federal Agency which administers compliance with this law concerning this apartment community is Federal Trade Commission. 1718 Peachtree St. N.W. Room 10000, Atlanta, Georgia 30308

I HAVE READ AND AGREED	TO THE PROVISI	ONS AS STATED.	-
Applicant's Signature	Date		
Co-Applicant's Signature	Date		

AUTHORIZATION FOR RELEASE OF BANKING, RESIDENCE, EMPLOYMENT, CREDIT AND POLICE INFORMATION

I (we)

Hereby authorize the release of information to the Credit Agency and their Attorneys or Representatives, and Global Background Analysis, Inc, as Agents, concerning my banking, credit, residence, employment, or police records about this application for housing at Portofino Bay POA Association.

I/we understand that the Board of Directors may cause to be instituted such an investigation of my background as the Board may deem necessary. Accordingly, I specifically authorize the Board of Directors of the Portofino Bay POA, or Global Background Analysis, Inc, as agents to make such investigation and agree that the information contained in the attached application may be used in such investigation.

Furthermore, I / we release to the Board of Directors and Officers of Portofino Bay POA, Harbor Management, Global Background Analysis, Inc, as Agent (to include: Employees, Officers, Directors, Brokers, Agents, and representatives of the foregoing) and all persons and firms providing or receiving information in this report, from any and all claims or liability which might arise from the release transmission, assembly, interpretation of information, denial or application or other adverse action.

Signature of Applicant

Date

Signature of Co-Applicant

Date

Receipt for Governing Documents, Rules, and Regulations

All new residents (Purchasers & Lessees) must receive a copy of the Rules and Regulations of the Association and sign the following receipt, acknowledging that they will abide by them. This receipt must be returned to

Portofino Bay POA, Inc c/o Harbor Management Services 15600 sw 288 st, #406 Homestead, FL 33033

I / we ______, am (are) in receipt of the Rules and Regulations of Portofino Bay POA, Inc and agree to abide by them or any future changes or additions to them.

I (we) will also familiarize myself (ourselves) with the Portofino Bay POA documents, and agree to be bound by them as well, including any future amendments.

I (we) agree that the Rules and regulations will be shared with all members of our household.

I (we) understand that parents will be responsible for minor children, and that host families will be responsible for all guests.

Property address:

Date: _____

Name(s) Printed:

Signature(s):

Portofino Bay Property Owners Association

PET REGISTRATION FORM

Applicant Property Address (in Portofino Bay) : Homestead, FL 3303	13
A. 📋 I have a pet (go to part B.) 🗌 I DO NOT Have any pets (go to part D.)	
B. Pet(s) owner's name	
Applicant Pet Owner is a Homeowner (complete 1 thru 4) OR Tenant (complete 1 thru	7)
 Homeowner Mailing Address: Homeowner Name (or Name of company) : Homeowner Phone: () Work Phone: () Cell Phone: () Email: Tenant Name (if applicable): Tenant Email Address(es) (1 required) Tenant Telephone Number: () Complete ALL of the following: (more than one pet? Attach additional form) 	
Type of Pet (Check one): Dog/Canine Cat/Feline Bird Other Pet's Name:, Pet's weight:, Pet's License/tag #	
Pet's breed:, Pet's color/markings, Pet's age: Other description(s)	
Insert here	
or attach	
PHOTO of Pet	
Complete Part D.	
D. I am aware of Portofino Bay Property Owners Association Rules and Regulations regarding pets and animals within the Association and agree to abide by them. If my pet(s) ownership or status changes, I will complete a new form.	
Signature X Date	
Print Name	
Approved and adopted by Board of Directors on January 2	20, 2022