

MILLER SIXTY-SEVEN TOWNHOUSES CONDOMINIUM ASSOCIATION, INC.

PLEASE READ THE FOLLOWING INSTRUCTIONS BELOW BEFORE MAILING OR BRINGING YOUR APPLICATION

Application for Consent to Sale, Lease, or Occupancy

If you have any questions or require additional assistance, please do not hesitate to contact us via email at Info@anchorsailpm.com

Application **MUST BE** filled out and signed. **Missing or incomplete applications and/or documents will NOT be accepted.** **NO FAXES ALLOWED, ORIGINAL SIGNATURES ONLY. DO NOT print front & back, double-sided copies are NOT allowed.**

The application **processing time** may take **up to 7-10 business days from the date after receipt of the completed application** and all other required documents requested by the Association. The Board of Directors will have **Ten (10) additional WORKING days** to review the package to approve or disapprove the applicant(s). **PLEASE DO NOT CALL THE MANAGEMENT COMPANY FOR STATUS AS THIS WILL DELAY THE PROCESS, WAIT UNTIL WE CONTACT YOU.**

- Complete one (1) application **PER PERSON** 18 yrs or older, **if married only One (1) Application** is needed.
- **If married**, a Copy of the marriage certificate.
- Payment for the application fee
- Authorization for release of credit report
- Photocopy of picture ID
- Photocopy of valid unexpired vehicle registration
- All pet documentation (registration, shot records, and picture)
- Copy of fully executed sales/rental agreement
- Payment for Lease Security Deposit (Equal to 1 Months' Rent. Cashier's Check or Money Order **ONLY**. No Personal Checks will be accepted. Made out to **Miller 67 Townhouses**)

The application fee is \$150.00 per person (except married couple), **NON-REFUNDABLE**, and payable with **MONEY ORDER** to **Anchor & Sail Property Management**.

Restrictions:

- **Occupancy Regulations:** NO more than two (2) occupants per room.
- **2 vehicles ONLY = 1 assigned parking spaces, NO exception! You may lease an additional parking space for 1 year, if available at an additional cost.**
- **NO dogs are allowed as of 03/19/2002.**

If approved, once approval is ready, who do we contact for **PICK UP:**

Name: _____

Cell Phone: _____ Email: _____



PO BOX 22-8322
Miami, FL 33222-8322
T: (954) 228-5152

Application for Consent to Sale, Lease, or Occupancy

Date: _____

Is this an investment property: Yes (____) No (____)

MUST BE FILLED OUT – NO BLANK SPACES – Please print clear

Owner's Name: _____ Telephone: _____

Owner's Mailing Address: _____

Owner's Email Address: _____

Name and Telephone of Realtor: _____

APPLICANT(S) INFORMATION

NAME of Proposed Buyer(s) (as they will appear on Title) OR Tenant

a) _____ b) _____

NAME, AGE AND RELATIONSHIP of ALL other family members that will occupy the unit:

NAME	AGE	RELATIONSHIP
_____	_____	_____
_____	_____	_____
_____	_____	_____

1. I hereby agree for myself and on behalf of all persons who may use the property which I seek to purchase/rent that we will abide by all the restrictions contained in the By-Laws, Rules and Regulations, Condominium Documents and restrictions which are or may in the future be imposed by the Board of Directors of the community.
2. I have ___ have not ___ received from the current owner a copy of all the Condominium Documents and Rules and Regulations.
3. I understand that the acceptance for purchase of a property is conditioned upon the truth and accuracy of this application and the approval of the Board of Directors. Occupancy before final approval is prohibited.
4. I understand that the Board of Directors of the community hereinafter referred to as "the Community Association," may cause to be instituted such as an investigation of my background as the Board of Directors may deem necessary. Accordingly, I specifically authorize the Board of Directors or their agents to make such an investigation and agree that the information contained in this and the attached application may be used in such investigation and that the Board of Directors of and Officers of the Community Association itself shall be held harmless from any action or claim by me in connection with the use of the information contained herein or any investigation conducted by the Board.

In making the foregoing application, I am aware that the decision of the Board of Directors will be final and that no reason will be given for any action taken by the Board of Directors. I agree to be governed by the determination of the Board.

Signature of Applicant

Signature of Co-Applicant



PO BOX 22-8322
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Name: _____
(Last) (First) (Middle)

Co-Applicant: _____
(Last) (First) (Middle)

Applicant Cell: _____ Co-Applicant Cell: _____

Email: _____ Email _____

Present Address (NOT the address you are moving to): _____
(Street)

(City) (State) (Zip)

Present Landlord/Mortgage Company (NOT for the address you are moving to):

(Name) (Telephone)

Date of Birth: _____
(Applicant) (Co-Applicant)

License Number: _____
(Applicant) State (Co-Applicant) State

Children: _____ Pets: _____
(How many and ages) (Description and approximate weight)

Total Number of people to occupy premises: _____

In case of Emergency, notify: _____ Telephone: _____

Make, Model & Color: _____ Tag Number: _____
(Vehicle 1)

Make, Model & Color: _____ Tag Number: _____
(Vehicle 2)

EMPLOYMENT INFORMATION:

(Applicant's Employer) (Employer's address)

(Position) (Date of Employment) (Employer's telephone)

(Co-Applicant's Employer) (Employer's address)

(Position) (Date of Employment) (Employer's telephone)



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NAME & PHONE OF RELATIVE: _____

CHARACTER REFERENCES OTHER THAN RELATIVES:

_____ (Name)	_____ (Home telephone)	_____ (Office/work telephone)
_____ (Name)	_____ (Home telephone)	_____ (Office/work telephone)
_____ (Name)	_____ (Home telephone)	_____ (Office/work telephone)

Approval is hereby granted to Florida Advanced Properties as an agent, to investigate all information supplied on this application and full disclosure of pertinent facts may be made to Miller 67 Townhouses Condominium is authorized to obtain credit rating through a credit reporting agency.

Signature of Applicant

Signature of Co-Applicant

Date: _____

Date: _____

Lease is subject to renewal at the end of the lease term

**ONCE APPROVED IT IS THE RESPONSIBILITY OF THE APPLICANT
TO GO TO THE MANAGEMENT OFFICE AND OBTAIN THEIR PARKING DECALS,
ALL VEHICLES WITH OUT DECALS WILL BE TOWED AT OWNERS EXPENSE.**



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Owner Acknowledgment and Agreement for Lease of Unit c/o Miller Sixty-Seven Townhouses Condominium Association

As a unit owner within Miller Sixty-Seven Townhouses Condominium Association, I understand and agree to the following terms regarding leasing my unit:

1. **Approval for Tenant Move-In**: I acknowledge that keys to my unit will not be provided to tenants for move-in until written approval is obtained from the Condominium Association.

2. **Violation Fine**: In the event of violating the above-stated agreement, I agree to pay a fine of \$500 or more, as determined by the Condominium Association.

3. **Tenant Approval Jeopardy**: I understand that failure to adhere to the association's guidelines regarding tenant move-in approval may jeopardize the approval of my tenant. This may result in the disapproval and removal of the tenants from the community.

I, _____, acknowledge that I have read and understood the terms outlined above.
Print Name of Unit Owner

Unit Owner's Signature

Date

I, _____, acknowledge that I have read and understood the terms outlined above.
Print Name of Tenant

Tenant's Signature

Date

Application For Sale / Lease or Occupancy

Date _____

Anchor & Sail Property Management, LLC

IMPORTANT: Each co-resident/co-applicant must submit separate applications.

PERSONAL INFORMATION

Applicant's Name _____ Date of Birth _____ SS # _____
First Middle Last

Marital Status _____ Driver License No _____ State _____

Co-Applicant's Name _____ Date of Birth _____ SS # _____
First Middle Last

Marital Status _____ Driver License No _____ State _____

Other Occupants

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

Do you own pets? _____ If yes, type (breed) _____ Size/Weight _____

Have you, the co-applicant(s), and/or any occupant(s) ever been arrested, charged and/or convicted of a crime? _____ If Yes, Provide detailed explanation. (Use reverse side of this application)

Emergency contact (Name/Phone) _____

RESIDENT HISTORY

Present Street Address _____ State _____ Zip _____

To/From _____ Monthly Payment \$ _____ Landlord's Name _____

Phone () _____ Reason For Moving _____

Previous Street Address _____ State _____ Zip _____

To/From _____ Monthly Payment \$ _____ Landlord's Name _____

Phone () _____ Reason For Moving _____

Have you and/or the co-applicant(s) ever been evicted from any property? _____ If Yes, Provide detailed explanation. (Use reverse side of this application)

EMPLOYMENT HISTORY

Present employer _____ Supervisor _____

Address _____ Phone () _____

Position _____ Date of employment _____ Gross weekly salary \$ _____

Previous employer _____ Supervisor _____

Address _____ Phone () _____

Position _____ Dates of employment _____ Gross weekly salary \$ _____

Co-Applicant's employer _____ Supervisor _____

Position _____ Phone () _____ Salary \$ _____

INCOME

Gross annual salary (Including fees, tips, commissions and bonuses) \$ _____

Gross annual salary spouse \$ _____

Other income you want to disclose \$ _____

BANK INFORMATION

Account No _____ Account type _____ Bank Name and Branch _____

Account No _____ Account type _____ Bank Name and Branch _____

CHARACTER REFERENCE

Name _____ Phone No _____ Relation: _____

Name _____ Phone No _____ Relation: _____

(If necessary use reverse side of this application to list additional accounts)

VEHICLES

Year _____ Make _____ Tag No _____ State _____ Registered to _____

Year _____ Make _____ Tag No _____ State _____ Registered to _____

Year _____ Make _____ Tag No _____ State _____ Registered to _____

Applicant(s) has submitted the sum of \$ _____, which is **non-refundable** payment for credit check/background check processing charge of the application. Such sum is not a rental payment or security deposit. This amount will be retained by the management to cover the cost of processing the application. It is understood and agreed between the parties that in the event this application for the above referenced apartment is rejected by _____ then said sum so received, as security deposit shall be returned to applicant without interest. It is further understood and agreed that in the event that said application is approved and accepted by _____ then said amount received below shall be applied on that security deposit so called for in the lease entered into between the parties. It is further understood and agreed by the parties that in the event that said application is approved and accepted by _____ and applicant refuses to enter into a lease agreement for the period of time as called for in applicants application then the sum so received herein shall be retained by _____ to serve as liquidation damages it will suffer by reason of applicants failing to enter into residency of that above stated apartment, but the acceptance or rejection of applicant shall remain within the sole discretion of _____.

_____ and United Screening Services Corporation is hereby authorized and given the right to verify by reasonable means the application including but not limited to credit check, criminal history, eviction-civil records, landlord verification, and verification of employment; and to exercise at its sole discretion as to whether to reject this application and/or to terminate any lease which may be entered into between the parties pursuant to this application, whether during the term of the said lease or any extensions or renewal thereof if the applicant has made any false statements or misrepresentations whatsoever in the application. Furthermore, applicant(s) certify it has not knowingly omitted any information from this application, any additional documents in the application packet, exhibits and/or attachments.

Applicant signature _____ Date _____

Spouse signature _____ Date _____

Application For Sale / Lease or Occupancy

Date _____

Anchor & Sail Property Management, LLC

IMPORTANT: Each co-resident/co-applicant must submit separate applications.

PERSONAL INFORMATION

Applicant's Name _____ Date of Birth _____ SS # _____
First Middle Last

Marital Status _____ Driver License No _____ State _____

Co-Applicant's Name _____ Date of Birth _____ SS # _____
First Middle Last

Marital Status _____ Driver License No _____ State _____

Other Occupants

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

Do you own pets? _____ If yes, type (breed) _____ Size/Weight _____

Have you, the co-applicant(s), and/or any occupant(s) ever been arrested, charged and/or convicted of a crime? _____ If Yes, Provide detailed explanation. (Use reverse side of this application)

Emergency contact (Name/Phone) _____

RESIDENT HISTORY

Present Street Address _____ State _____ Zip _____

To/From _____ Monthly Payment \$ _____ Landlord's Name _____

Phone () _____ Reason For Moving _____

Previous Street Address _____ State _____ Zip _____

To/From _____ Monthly Payment \$ _____ Landlord's Name _____

Phone () _____ Reason For Moving _____

Have you and/or the co-applicant(s) ever been evicted from any property? _____ If Yes, Provide detailed explanation. (Use reverse side of this application)

EMPLOYMENT HISTORY

Present employer _____ Supervisor _____

Address _____ Phone () _____

Position _____ Date of employment _____ Gross weekly salary \$ _____

Previous employer _____ Supervisor _____

Address _____ Phone () _____

Position _____ Dates of employment _____ Gross weekly salary \$ _____

Co-Applicant's employer _____ Supervisor _____

Position _____ Phone () _____ Salary \$ _____

INCOME

Gross annual salary (Including fees, tips, commissions and bonuses) \$ _____

Gross annual salary spouse \$ _____

Other income you want to disclose \$ _____

BANK INFORMATION

Account No _____ Account type _____ Bank Name and Branch _____

Account No _____ Account type _____ Bank Name and Branch _____

CHARACTER REFERENCE

Name _____ Phone No _____ Relation: _____

Name _____ Phone No _____ Relation: _____

(If necessary use reverse side of this application to list additional accounts)

VEHICLES

Year _____ Make _____ Tag No _____ State _____ Registered to _____

Year _____ Make _____ Tag No _____ State _____ Registered to _____

Year _____ Make _____ Tag No _____ State _____ Registered to _____

Applicant(s) has submitted the sum of \$ _____, which is **non-refundable** payment for credit check/background check processing charge of the application. Such sum is not a rental payment or security deposit. This amount will be retained by the management to cover the cost of processing the application. It is understood and agreed between the parties that in the event this application for the above referenced apartment is rejected by _____ then said sum so received, as security deposit shall be returned to applicant without interest. It is further understood and agreed that in the event that said application is approved and accepted by _____ then said amount received below shall be applied on that security deposit so called for in the lease entered into between the parties. It is further understood and agreed by the parties that in the event that said application is approved and accepted by _____ and applicant refuses to enter into a lease agreement for the period of time as called for in applicants application then the sum so received herein shall be retained by _____ to serve as liquidation damages it will suffer by reason of applicants failing to enter into residency of that above stated apartment, but the acceptance or rejection of applicant shall remain within the sole discretion of _____.

_____ and United Screening Services Corporation is hereby authorized and given the right to verify by reasonable means the application including but not limited to credit check, criminal history, eviction-civil records, landlord verification, and verification of employment; and to exercise at its sole discretion as to whether to reject this application and/or to terminate any lease which may be entered into between the parties pursuant to this application, whether during the term of the said lease or any extensions or renewal thereof if the applicant has made any false statements or misrepresentations whatsoever in the application. Furthermore, applicant(s) certify it has not knowingly omitted any information from this application, any additional documents in the application packet, exhibits and/or attachments.

Applicant signature _____ Date _____

Spouse signature _____ Date _____

MILLER SIXTY-SEVEN TOWNHOUSES CONDOMINIUM ASSOCIATION, INC.

MOVE-IN INSTRUCTIONS

Please follow the instructions regarding the use of the recycling bins, trash disposal, and sewer system as follows:

GREEN GARBAGE BIN: All household garbage must be placed and secured in plastic garbage bags before putting into the green garbage bin to avoid odors and health hazards. Please bag all lawn clippings (including leaves, grass, broken down branches, etc.) and place them in the green garbage containers.

BLUE RECYCLE BIN: Please break down all boxes and place them in the blue recycling containers. The following items are NOT to be disposed of in the blue recycle bin:

- Paper towels, tissues, Q-Tips, etc.
- Plastic shopping bags
- Please see Recycling Instructions posted at the garbage areas for more information.

BULK TRASH DISPOSAL: Please be advised that no items are allowed to be dumped on the swale of the Miller side of the Association.

SEPTIC/SEWER SYSTEMS: In order to prevent sewage back-ups and the additional cost of repairing the septic and sewer systems, the following items CANNOT be flushed down the toilets:

- Condoms (natural and/or synthetic)
- Feminine Hygiene Products (sanitary napkins and/or tampons)
- Food
- Paper Towels or Facial Tissues
- Tobacco Products
- Wipes (baby wipes, adult wipes, facial wipes, etc.

IMPORTANT: PLEASE FLUSH TOILET PAPER ONLY, NO WIPES.

POOL GATES: The pool gates must be securely closed at all times. Please make sure that the pool gates are closed securely to prevent any unwanted serious incident or accident.

MAIL DELIVERY: All new residents and owners must include their unit number (101-903) with the mailing address when submitting an address change to the United States Postal Service, or your mail will not be delivered.

IMPORTANT: MILLER SIXTY-SEVEN TOWNHOUSES CONDOMINIUM ASSOCIATION WILL NOT BE RESPONSIBLE FOR UNDELIVERED MAIL.

MILLER SIXTY-SEVEN TOWNHOUSES CONDOMINIUM ASSOCIATION, INC.

MOVE-IN INSTRUCTIONS

VEHICLES WITH TRAILER HITCH: To prevent safety hazards, vehicle with a trailer hitch may not back into a parking space next to any walkway. Vehicles with a trailer hitch may back into a parking space at the back of the community away from the walkways, or park outside the community at their own risk.

PETS (ONLY IF UNIT OWNER PERMITS): Pets are restricted to two (2) indoor cats and caged birds that DO NOT cause a noise disturbance and must NOT be left unattended to cause a disturbance (like defecating throughout the community and/or causing damage to any persons or property). Cats must be kept indoors at all times. Dogs are NOT permitted anywhere in the community as of 03/19/2002.

We encourage all Residents to help our Property Management Team monitor violations.

Applicant – Print Name

Date

Applicant's Signature

Co-Applicant – Print Name

Date

Co-Applicant's Signature



MILLER SIXTY-SEVEN TOWNHOUSES CONDOMINIUM

Acknowledgement of Rules and Regulations

New Purchase _____ **New Lease** _____ **Occupancy** _____

I, _____ and _____ who will reside at _____ at Miller Sixty-Seven Townhouses Condominium Association acknowledge that I/we are in receipt and have read and understand the Rules and Regulations given by the seller or landlord and agree to abide by them or any further changes/additions to them.

I understand that all persons living in my home over the age of 18 will be screened and approved by the association and any unapproved tenants will be evicted at the Unit Owner's expense.

Tenant's or Buyer's Signature

Date

Print Name:

Tenant's or Buyer's Signature

Date

Print Name:

MILLER SIXTY-SEVEN TOWNHOUSES CONDOMINIUM ASSOCIATION, INC.

RULES & REGULATIONS (Revised July 13, 2015)

The Board of Directors as provided in the Declaration of Condominium and By-Laws has adopted the following Rules & Regulations for the maintenance, conservation, and beautification of the condominium property, and for health comfort, and general welfare of the unit owners and occupants:

SINGLE-FAMILY RESIDENCES:

1. As per the Association documents, it is not permissible to sublease a unit by either owner or renter.
2. Condominium units are single-family residences and as such among of people to live in each unit is limited to four (4).

COMMON AREAS:

1. All doors leading from the condominium buildings shall be closed at all times except when in actual use for any purpose other than ingress or egress.
2. The sidewalk, entrances, passages of the condominium buildings shall not be obstructed or used for any purpose other than ingress and egress.
3. No condominium unit owner or resident shall engage in repair of motor vehicles, boats, or trailers within the common elements other than for an emergency.
4. None of the common elements shall be decorated or furnished by any Condominium unit owner or resident.
5. Any use of the pool facilities must respect the rights of other unit owners and residents conform to applicable standards of health and safety. Individuals are expected to abide by the rules posted in the pool area. Those using the pool are responsible for cleaning up all trash in the pool areas incidental to their use (i.e., cans, cigarette butts, food, paper, etc.). The pool shall be used during daylight hours and all person using the pool do so at their own risk. Children under thirteen (13) years of age are not permitted to be in the pool area unless accompanied by an adult. There are no pool parties allowed without prior approval of the Board/Association.
6. No glass or bottles are permitted in the pool area.
7. After using the umbrella in the pool area, please ensure to turn umbrella to down position.

ARCHITECTURAL:

1. Small satellite dishes (as defined 15" in diameter or less) may be installed upon obtaining the architectural approval from the Board/Association.
2. Without the prior written consent of the Association, no owner shall cause or permit anything to be placed on the outside walls of any building, and no sign, awning, canopy, shutter, radio or television antenna shall be affixed to or placed upon the exterior walls or roof or any part thereof. Also, the unit owner may not cause or permit the enclosure either partially or entirely, or any exterior portions of the building.
3. No signs regarding rental or sale of property are permitted to be posted in the windows or any common area of the property.
4. No clothes, sheets, blankets, laundry of any kind or other articles shall be hung out or exposed on any part of the exclusive common area or the common areas.

GARBAGE:

1. All garbage and debris is to be deposited only in the facilities provided for that purpose. Large garbage items (i.e., rugs, appliances, furniture, etc.), should be deposited outside on the east side of the property located in front of building 7 on Miller Road, where it can be picked up by special City garbage collectors. The limited common elements and the common elements shall be kept free and clear of rubbish, debris and other unsightly materials which are provided for that purpose.

PARKING:

1. Parking areas shall be solely for parking automobiles and motorcycles, no commercial vehicles, or trucks, regardless of size and/or weight, are permitted to park overnight.
2. Due to limited visitor parking, no assigned parking space should be left open overnight.
3. There is an assigned parking space per unit. Visitor or second cars are allowed to park in the authorized marked areas on a first come, first serve basis. Any vehicle parked in an unauthorized or unmarked area shall be towed without any prior notice at the owner's expense.
4. Parking on the concrete ends, double parking and/or parking in an unoccupied unit spot will result in towing without prior written notice and at the owner's expense.
5. Guest parking is for an amount of time not exceed forty-eight (48) hours. All guests and/or owners who overstay the deadline will be towed at the vehicle owner's expense.
6. Unit owners shall not transfer or assign use of their parking spaces except in connection with the sale of the condominium unit.
7. If you have a vehicle that has a hitch on the back, please assure that it does not overhang on the concrete side of sidewalk.
8. No vehicle shall be driven at speed greater than five (5) miles per hour on Condominium property.

SAFETY:

1. There shall not be kept in any condominium unit any inflammable, combustible, or explosive fluid.
2. Condominium unit owners, residents, family guests, servants, employees, agent and visitors shall not at any time for any reason whatsoever enter upon the roof, power rooms, service rooms or areas in the sewage treatment facility.
3. No condominium unit owner or resident shall engage in the repair of motor vehicles, boats or trailers within the common elements other than for emergency service.

PETS:

1. As of March 19, 2002, no new dogs will be permitted by present owners or tenants. Dogs allowed prior to March 19, 2002, will be grandfathered in, but cannot be replaced. No new owner or tenant applications will be approved if they have dogs as pets.
2. The few owners remaining with pets must have control of their pets at all times. Pets are not allowed to be unattended so as to cause disturbance (defecating in community, barking, etc.)
3. Permitted animals shall be restricted to 2 cats and caged birds that do not cause a noise disturbance. Cats must be kept indoors at all times.

NUISANCE:

1. No condominium unit owner or resident shall play upon or permit to be played any musical instrument or operate or permit to be operated a phonograph, radio, television set or other loudspeaker in a condominium unit between the hours of 11:00 pm and the following 8:00 am. If the same shall unreasonably disturb or annoy other occupants of the Condominium.
2. There will be no owners allowed to serve as members of the Board of Directors if they are in violation of any of the Rules and Regulations and/or in arrears of their monthly maintenance fees.

LEASES:

1. No owner may lease their unit without prior approval from the Board of Directors. No one will be interviewed unless completed paperwork has been submitted to the property management company. Any owner having someone move into their unit without prior Board of Directors approval is in violation of the Condominium By-Laws and tenant will be subject to immediate eviction.
2. The association will require, as a condition to rent a unit, a security deposit **in the amount equal to one (1) month rent** which will be deposited into an escrow account maintained by the association. Within thirty (30) days after a tenant vacates the premises, the association shall refund the full security deposit or give written notice to the tenant of any claim made against the security deposit. Refund must be requested by the person

who submitted the deposit, in written to the management office, must indicate full name, telephone number, address of the unit rented and mailing address where the refund will be sent.

3. All purchase or lease applications received must have a fully executed lease agreement attached and must be accompanied by all the other documents requested including the screening fee in the amount of \$150.00.
4. All purchase or lease applications must be received by the 1st of the month to be processed by the fourth Thursday of the same month.
5. All leases are not automatically renewable and are good for one (1) year. Any extension of leases will be subject to approval by the Board of Directors.
6. No unit shall be rented that has not been occupied by the owner for less than one (1) year. If any tenant vacates the unit prior to meeting one (1) year in the unit, the unit must remain unoccupied until the anniversary of that lease has been satisfied.
7. There will be no lease approval issue for any unit that is not in compliance with the Rules & Regulations, that is in arrears in their maintenance payments, that has not owned the unit for a full year prior to rental and/or that not complied with the one year lease rule that is clearly stated in the By-Laws.
8. Any tenant not adhering to the rules and regulations will be subject to immediate eviction without notice at the unit owner's expense.

MAINTENANCE FEES:

1. Any and all maintenance payments that are returned for any reason whatsoever will be subject to a \$50.00 fee along with any other fees incurred by the management company.
2. Any owner not paying their maintenance and having fallen into a past thirty (30) days delinquency status with their unit rented will have the rent collected from the tenant until the account is current. Florida Statutes protect the association and demand the tenant to comply or be evicted.
3. Any renter found violating the rules and regulations will be evicted at the owner's expense. All management and legal fees will be charged to the owner.

VIOLATIONS:

1. Violations are subject to a fine up to \$1,000.00 per violation and a non-refundable \$50.00 administrative fee. You will be given the opportunity to attend a hearing panel meeting to state your case. Should you fail to attend the meeting, the fine will be assessed to your account by default.
2. Any owner found violating the rules and regulations will have seventy-two (72) hours to correct the violation. Should the violation not be corrected immediately, legal action will be commenced within five (5) business days. All legal fees will be paid by the unit owner.
3. All new owners must be provided by the By-Laws of the condominium prior to the sale being approved. New owners will be screened, and this is one of the requirements.

**MILLER SIXTY-SEVEN TOWNHOUSES CONDOMINIUM ASSOCIATION, INC.
REASONABLE ACCOMMODATION REQUEST VERIFICATION FOR RESIDENTS**

Date: _____

To: _____
Health Care Provider's Name

Health Care Provider's Address

Health Care Provider's Signature

From: Miller Sixty-Seven Townhouses Condominium Association, Inc.
c/o Anchor & Sail Property Management LLC
P.O. Box 22-8841
Miami, FL 33222-8841

RE: REQUEST FOR ACCOMMODATION

NAME OF PERSON REQUESTING REASONABLE ACCOMMODATION:

APPLICANT: _____

ADDRESS: _____

The Applicant named above has requested that the Association accommodate the Applicant's disability by allowing the Applicant to bring an assistance animal onto the condominium property. Specifically, Section 11 of Article 10 of the Association's Declaration of Condominium provides as follows: "All animals and pets of any kind acquired after the date of this Amendment shall be prohibited in the units and upon the Condominium premises. . . "

Under normal circumstances, our policies would require us to deny the request. However, under federal law, if an individual with disabilities requests a reasonable accommodation due to that disability, we must consider the request. To do this, we must verify that the individual qualifies under federal law and requires the accommodation in order to have an equal opportunity to use and enjoy the condominium property and amenities.

We would appreciate your cooperation in answering the questions on this form and returning it to the Association's address listed above. The Applicant has consented to this release of information as shown below.

INFORMATION REQUESTED

1. Are you the Applicant's treating medical professional with knowledge of Applicant's medical condition and history?
_____ Yes _____ No

2. Please indicate the date on which you last provided care or services to the Applicant: _____.

3. If you are a licensed or certified health care practitioner in another state, have you provided in-person care or services to the Applicant on at least one occasion. _____ Yes _____ No _____ N/A, I am licensed or certified in Florida.

4. If your answer to item number 3 above is yes, please indicate the date that you last provided in-person care or services to the Applicant: _____

5. Does the Applicant have a physical or mental impairment as described below? _____ Yes _____ No

6. What is the expected duration of the impairment? _____ Permanent _____ Temporary

7. Does the impairment substantially limit one or more of the Applicant's major life functions or activities?
_____ Yes _____ No

8. If yes, please indicate which major life functions or activities are affected and describe how it affects the Applicant.

9. In your professional opinion, does Applicant need the accommodation requested in order to have the same opportunity that a non-disabled individual has to use and enjoy the condominium property? _____ Yes _____ No

10. If yes, please describe how the requested accommodation lessens the effects of Applicant's disability or facilitates the Applicant's ability to function. _____

11. If the assistance animal is a service animal as defined by the Americans with Disabilities Act ("ADA"), identify the specific activities and functions for which the service animal has been trained to assist the Applicant with his/her disability and identify the trainer or trainers for the service animal.

DEFINITION OF "DISABLED"

Under federal law, an individual is disabled if he/she has a physical or mental impairment that substantially limits one or more major life activities, has a record of such an impairment, or is regarded as having such an impairment.

The term "physical or mental impairment" includes:

1. Any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: Neurological; musculoskeletal; specific sense organs; respiratory, including speech organs; cardiovascular; reproductive; digestive; genito-urinary; hemic and lymphatic; skin; and endocrine;
2. Any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities. The term physical or mental impairment includes, but is not limited to, such diseases and conditions as orthopedic, visual, speech and hearing impairments, cerebral palsy, autism, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, Human Immunodeficiency Virus infection, mental retardation, emotional illness, drug addiction (other than addiction caused by current, illegal use of a controlled substance) and alcoholism.

Major life functions or activities means functions such as caring for one's self, performing manual tasks, walking, lifting, reaching, sitting, sleeping, standing, seeing, hearing, speaking, breathing, concentrating, learning, interacting with others, and working.

STATUTORY PENALTY: IN ACCORDANCE WITH SECTIONS 413.08(9) AND 817.265, FLORIDA STATUTES, A PERSON WHO KNOWINGLY AND WILLFULLY MISREPRESENTS HERSELF OR HIMSELF, THROUGH CONDUCT OR VERBAL OR WRITTEN NOTICE, AS HAVING A DISABILITY OR DISABILITY RELATED NEED FOR A SERVICE ANIMAL OR EMOTIONAL SUPPORT ANIMAL OR BEING QUALIFIED TO USE A SERVICE ANIMAL OR EMOTIONAL SUPPORT ANIMAL OR AS A TRAINER OF A SERVICE ANIMAL COMMITS A MISDEMEANOR OF THE SECOND DEGREE, PUNISHABLE BY (1) A DEFINITE TERM OF IMPRISONMENT NOT EXCEEDING 60 DAYS AS PROVIDED IN SECTION 775.082, FLORIDA STATUTES OR (2) A FINE OF \$500.00 AS SET FORTH IN SECTION 775.083, FLORIDA STATUTES AND SUCH VIOLATOR MUST PERFORM 30 HOURS OF COMMUNITY SERVICE FOR AN ORGANIZATION THAT SERVES INDIVIDUALS WITH DISABILITIES, OR FOR ANOTHER ENTITY OR ORGANIZATION AT THE DISCRETION OF THE COURT, TO BE COMPLETED IN NOT MORE THAN 6 MONTHS.

NAME & TITLE OF PERSON SUPPLYING INFORMATION: _____

FIRM/ORGANIZATION: _____

HEALTH CARE PROVIDER'S SIGNATURE: _____

HEALTH CARE PROVIDER'S OFFICE NO: _____ FAX NO: _____

HEALTH CARE PROVIDER'S EMAIL ADDRESS: _____

MEDICAL LICENSE NO. (IF PHYSICIAN): _____ DATE: _____

RELEASE

TO THE APPLICANT:

RELEASE: I hereby authorize the release of the requested information. The information obtained under this consent is limited to information that is no older than twelve (12) months. There are circumstances that would require the Association named above to verify information that is up to five (5) years old, which would be authorized by me on a separate consent, attached to a copy of this consent.

SIGNATURE: _____ DATE: _____

ID Examples for Service Animal or Emotional Support Animal

U.S. Registered Support Animal

Handler of this Support Animal ID Card meets one of the following requirements under the ADA; American with Disabilities Act, Air Carrier Act, Fair Housing Act or the Rehabilitation Act of 1973. The handler and support animal

Name: Amy Hyer
Animal Name: Pete
Breed: Brussels Griffon
State: FL
ID Number: 5555555555

To Verify Registration Visit Online or Scan QR Code
www.USAServiceDogRegistration.com

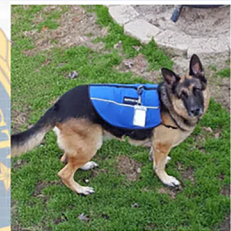


U.S. Registered Service Dog

Handler of this Service Dog ID card meets one of the requirements under ADA; Americans with Disabilities Act, Fair Housing Act, Air Carrier Act or the Rehabilitation Act of 1973. The Service Dog and Handler qualify for Full Access to all Public Places.

Name: AMBER LARNETT
Animal Name: ZEUS
Breed: GERMAN SHEPHERD DOG
State: CA
ID Number: 123456789

To Verify Registration Visit Online or Scan QR Code
www.USAServiceDogRegistration.com



Emotional Support Animal

NSAR CERTIFIED



NAME: [Dogs Name]
HANDLER: J. Smith
REG. DATE: MM/DD/YY
TYPE: ESA

NSAR ID: D123456



WWW.NSARCO.COM

TOLL FREE: 866-737-3930

Access Required by Law

RIGHTS PROTECTED UNDER U S FEDERAL LAW

EMOTIONAL SUPPORT DOG

Handler and Animal are protected under the following law :
Fair Housing Act (FHA), 42 U.S.C.A. 3601 et seq.)

Animal's Name: Chip [123456789012345]
[Name] [Current Address]
Handler's Name: Telephone: (123) 456-7890
[First & Last Name]

Do not separate animal from the handler. They are to be transported together.



Registry Number
1234567890
Scan QR code on left to verify
registration or visit
www.usservicedogsregistry.org

