

PROPERLY MANAGED
7373 E. Country Club Blvd.
Boca Raton, FL 33487
262-490-4828

INCLUDE WITH YOUR APPLICATION:

**SIGNED AND DATED LEASE OR SALES CONTRACT WITH ALL SIGNATURES.
A MINIMUM CREDIT SCORE OF 680 IS REQUIRED**

COPY OF ALL RESIDENTS DRIVERS LICENSES, COPY OF VEHICLE REGISTRATION
AND INSURANCE.

IF MORE THAN ONE OCCUPANT UNMARRIED, MAKE COPIES OF THE
"Authorization Form and Application". EACH PERSON MUST FILL ONE OUT.

**NO COMMERCIAL VEHICLES, BOATS, TRAILERS, OR RV'S. (MAX. LENGTH OF
VEHICLE 18 FT) ONLY 2 VEHICLES ALLOWED PER UNIT. UNLESS THERE ARE MORE
THAN 2 LICENSED DRIVERS IN THE UNIT AND THEY HAVE THE SPACE IN THEIR
DRIVEWAY.**

APPLICATION FEE OF \$150.00 MADE PAYABLE TO "PROPERLY MANAGED".

**TENANTS MUST INCLUDE A REFUNDABLE SECURITY DEPOSIT OF \$300.00 MADE
PAYABLE TO "TRES VIDAS CONDOMINIUMS".**

INCOMPLETE APPLICATION PACKAGES WILL NOT BE ACCEPTED OR PROCESSED.

**PETS ARE NOT ALLOWED FOR TENANTS. OWNERS PETS HAVE A WEIGHT LIMIT
OF 50 POUNDS AT MATURITY. Owners are allowed no more than 2 dogs or
Cats.**

APPLICANTS WILL BE NOTIFIED WITHIN 30 DAYS OF THE COMPLETED
APPLICATION PROCESS.

Tres Vidas Condominium Association
Information Sheet 2026

Unit _____

Owners Name(s) _____

Owners Children's Names and Ages _____

Pets? _____ Breed _____ Weight _____ Last Date of Shots _____

Owners Mailing Address _____

Owners Home Phone _____ Cell _____

Owners E-Mail Address _____

TENANTS:

Name(s) _____ Cell _____
Name _____ Cell _____

Tenants E-Mail Address _____

Tenants E-Mail Address _____

Pets? _____ You must submit Support or Service Paperwork. Call Management for Forms.

Children's Names and Ages _____

Tenants Emergency Contact _____ Cell _____

Lease Starts _____ Ends _____

Vehicle Information:

Auto 1
Make _____ Year _____ Color _____ Tag# _____ State ___ Permit # _____

Auto 2
Make _____ Year _____ Color _____ Tag# _____ State ___ Permit # _____

Auto 3
Make _____ Year _____ Color _____ Tag# _____ State ___ Permit # _____

READ FIRST: Complete all questions and fill in all blanks. All information supplied is subject to verification. If any question is not answered/left blank, or answered falsely, this application may be returned, not processed, and/or not approved. Missing information will cause delays. Once submitted, order can be cancelled but your fee will not be refunded. Rev. 06/2014

**** THIS APPLICATION IS FOR A SINGLE PERSON OR A MARRIED COUPLE ONLY! ****

APPLICATION FOR OCCUPANCY

Association Name: _____

Purchase Lease Occupant Apt.# _____ Bldg.# _____ Address applied for: _____

Full Name _____ Date of Birth _____ Social Security # _____

Single Married Separated Divorced How Long? _____ Other legal or maiden name _____

Have you ever been convicted of a crime? _____ Date (s) _____ County/State Convicted in _____

Charge (s) _____

Applicant's Cell Number(s) _____ Applicant's Email Address _____

Spouse _____ Date of Birth _____ Social Security # _____

Other legal or maiden name _____ Have you ever been convicted of a crime? _____ Date (s) _____

County/State Convicted in _____ Charge (s) _____

Spouse's Cell Number(s) _____ Spouse's Email Address _____

No. of people who will occupy unit – Adults (over age 18) _____ Description of Pets _____

Names and ages of others who will occupy unit _____

In case of emergency notify _____ Address _____ Phone _____

PART I – RESIDENCE HISTORY

A. Present address _____ Phone _____
(Include unit/apt number, city, state and zip code)

Apt. or Condo Name _____ Phone _____ Dates of Residency: From _____ to _____

Own Home Parent/Family Member Rented Home Rented Apt Other _____ Rent/Mtg Amount _____

Are you on the Lease? _____ If not, who is the leaseholder? _____ Are you on the Deed? _____ If yes, under what name? _____

Name of Landlord _____ Phone _____ Email address _____

Is your Landlord the: Owner of the property Realtor Family Member Roommate Property Manager Other _____

B. Previous address _____
(Include unit/apt number, city, state and zip code)

Apt. or Condo Name _____ Phone _____ Dates of Residency: From _____ to _____

Own Home Parent/Family Member Rented Home Rented Apt Other _____ Rent/Mtg Amount _____

Were you on the Lease? _____ If not, who is the leaseholder? _____ Were you on the Deed? _____ If yes, under what name? _____

Name of Landlord _____ Phone _____ Email address _____

Is your Landlord the: Owner of the property Realtor Family Member Roommate Property Manager Other _____

C. Previous address _____
(Include unit/apt number, city, state and zip code)

Apt. or Condo Name _____ Phone _____ Dates of Residency: From _____ to _____

Own Home Parent/Family Member Rented Home Rented Apt Other _____ Rent/Mtg Amount _____

Were you on the Lease? _____ If not, who is the leaseholder? _____ Were you on the Deed? _____ If yes, under what name? _____

Name of Landlord _____ Phone _____ Email address _____

Is your Landlord the: Owner of the property Realtor Family Member Roommate Property Manager Other _____

PART II – EMPLOYMENT REFERENCES

Include a recent copy of an earnings statement to expedite processing

- A. Employed by _____ Phone _____
 Dates of Employment: From: _____ To: _____ Position _____ Fax _____
 Monthly Gross Income _____ Address _____
- B. Spouse Employed by _____ Phone _____
 Dates of Employment: From: _____ To: _____ Position _____ Fax _____
 Monthly Gross Income _____ Address _____

PART III – BANK REFERENCES

Include a recent copy of a bank statement to expedite processing

- A. Bank Name _____ Checking Acct. # _____ Phone _____
 Address _____ Fax _____
- B. Bank Name _____ Savings Acct. # _____ Phone _____
 Address _____ Fax _____

PART IV – CHARACTER REFERENCES (No Family Members)

- 1. Name _____ Home Phone _____
 Address _____ Business Phone _____
 Email Address _____ Cellular Phone _____
- 2. Name _____ Home Phone _____
 Address _____ Business Phone _____
 Email Address _____ Cellular Phone _____
- 3. Name _____ Home Phone _____
 Address _____ Business Phone _____
 Email Address _____ Cellular Phone _____
- 4. Name _____ Home Phone _____
 Address _____ Business Phone _____
 Email Address _____ Cellular Phone _____

Are you using a realtor? Yes _____ No _____ If yes: Realtor's name _____
 Email Address _____ Cellular Phone _____

Driver's License Number (Primary Applicant) _____ State Issued _____
 Driver's License Number (Secondary Applicant) _____ State Issued _____
 Make _____ Type _____ Year _____ License Plate No. _____
 Make _____ Type _____ Year _____ License Plate No. _____

If this application is not legible or is not completely and accurately filled out, Associated Credit (and the Association) will not be liable or responsible for any inaccurate information in the investigation and related report (to the Association) caused by such omissions or illegibility.

By signing the applicant recognizes that the Association and Associated Credit will investigate the information supplied by the applicant, and a full disclosure of pertinent facts will be made to the Association. The investigation may be made of the applicant's character, general reputation, personal characteristics, credit standing, police arrest record and mode of living as applicable. This form is for the exclusive use of Associated Credit Reporting, Inc.

Applicant's Signature _____ Date _____ Spouse's Signature _____ Date _____

AUTHORIZATION FORM

I/We hereby authorize **Associated Credit Reporting, Inc.** to obtain data to verify any and all information they request with regards to my/our Application for Occupancy, specifically the verification of my bank account(s), credit history, residential history, criminal record history, employment verification and character references.

I/We hereby waive any privileges I/we may have with respect to the said information in reference to its release to the aforesaid party. Information obtained for this report is to be released to the authorized party designated on the Application for Occupancy, for their exclusive use only. PLEASE INCLUDE COPY OF DRIVER'S LICENSE TO CONFIRM IDENTITY. If you do not have a driver's license, please include a copy of your Passport or current government issued identification card.

I/We acknowledge our rights as stated in the Fair Credit Report Act that I/we are entitled to a copy of the report upon proper written request and can dispute any inaccurate information for re-verification. I/We understand that Associated Credit Reporting, Inc. is not directly involved in the approval or denial of any applicant. The information received by Associated Credit Reporting, Inc. shall be held in strict confidence, protected as governed under the Fair Credit Reporting Act, and will never be released to any third party other than the designated recipient. I/We further understand that this is a non-refundable process.

By signing below, I/We further state the Application for Occupancy and Authorization Form were signed by me/us and was not originated with fraudulent intent by me/us or any other person and that the signature(s) below are my/our own proper legal signature. I/We certify (or declare) under penalty of perjury that I/We agree to the foregoing and; that all answers and information contained on the Application for Occupancy are true and correct and will hold Associated Credit Reporting, Inc. harmless from the result of the investigation.

(Applicant's Signature)

(Spouse's Signature)

(Applicant's Name Printed)

(Spouse's Name Printed)

(Date Signed)

(Date Signed)

Application for Occupancy

Unit # _____

Important Association Requirements:

1. No Lease shall be for less than 3 months, nor more than 12 months. No Unit may be leased more than once for each calendar year.
2. The completed application must be submitted to the Association not less than 20 days prior to the desired date of occupancy.
3. All purchasers and occupants must be interviewed before final approval. Occupancy before final approval is prohibited.
4. One vehicle is permitted per licensed driver. No recreational vehicles, motor cycles, trailers, or commercial vehicles, or vehicles with writing as listed in the "Rules We Live By", are permitted. No storage of non-operational vehicles is permitted on the Banyan Courts property.

Applicants Agreement: Please initial next to each paragraph.

I hereby agree, for myself, and on behalf of all persons who may occupy or use the unit which I seek to occupy, that:

_____ I will abide by all rules and restrictions contained in the Bylaws, Rules and Regulations of the Association, and restrictions which are or may be imposed by the association in the future.

_____ I understand that there are restrictions concerning pets. **Pets are not allowed in leased units. Purchasers should carefully review the rules for pets.**

_____ I understand that sub-leasing or occupancy of this unit in my absence is prohibited.

_____ I understand that I must be present when any guests, visitors, or children (who are not permanent residents) occupy this unit.

_____ I understand that any violation of these terms, provisions, conditions, and covenants of the Associations documents provides cause for immediate action as therein provided or termination of the leasehold under appropriate circumstances.

_____ I understand that the acceptance, for occupancy of this unit, is conditioned upon the truth and accuracy of this application and upon approval of the Board of Directors. Misrepresentation, or other falsification of information on these forms, will result in the automatic rejection of this application.

_____ I understand that the Board of Directors of the Association may cause to be instituted such investigation of my background as the board may deem necessary. Accordingly, I specifically authorize the Board, or their agent to make such 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 and the Agent of the Association shall be held harmless from any action or claim by me, in the investigation conducted by the Board of Directors.

_____ I understand that a lease with "Option to Buy" is in no way binding on the Association. If and when the lease elects to exercise the said option, the Lessee must re-apply to the Board of Directors for Approval to purchase.

_____ I have received and read the Rules and Regulations of the Association and agree to abide by them. In making the foregoing application, I am aware that the decision of the Association will be final. No reason will be given for any action taken by the Board. I agree to be governed by the determination of the Board of Directors.

Applicant 1 _____ Date _____
Signature

Applicant 2 _____ Date _____
Signature

Date Received by Management _____