



## **Boca Lakes Condominium Association, Inc.**

**8768 Chevy Chase Drive • Boca Raton, FL 33433**

**Office: 561-482-7880 or 561-609-2505**

### **Boca Lakes Condominium Sales Packet**

**Please complete all information and return the completed paperwork to the Boca Lakes Condominium office.**

1. Must be 55 years or older - one occupant must be 55 or older and must reside in the unit when anyone under 55 is residing in the unit. No children under 18 years old may reside in unit.
2. **No pets** allowed with the exception of service dog or emotional support animal, which requires additional application with supporting documents.
3. Insurance for any unit purchased is required and must meet condo documents specifications and State of Florida mandates – Copy of insurance binder or insurance certificate must be faxed to Boca Lakes Condominium office.
4. Include a copy of Driver's License for each person that will be on Title/Deed and living in the unit.
5. Include a copy of your vehicle registration(s). – maximum of two vehicles. No pick-up trucks are allowed to park on property overnight (motorcycles, mopeds, electric scooters, electric bikes, RVs, campers and trailers are not allowed on property).
6. The 55 or over affidavit must be notarized.
7. **The application fee is \$150.00 which includes background/credit check.** The fees are nonrefundable. The payments must be included with the packet. We accept personal checks, money orders, or cashier checks made payable to Boca Lakes Condominium Association.
8. Closing agent / Title company: Estoppel/Questionnaire request through [www.homewisedocs.com](http://www.homewisedocs.com). Please have the Title/Closing company submit the request 7-10 business days prior to closing date. Allow 7-10 business days for processing. You can request a rush (separate fee).
9. No early move-in – The Association will not allow occupancy prior to closing date.
10. **Allow up to 10 days** for the entire application process to be completed.
11. Original documents must be signed in blue ink at appropriate places by both parties and all originals must be submitted to the Boca Lakes Condominium office as a complete packet including a fully executed sales contract.
12. All unit violations need to be cured before the sale application moves forward.
13. Closing Agent / Title and Realtor company information must be submitted including name, phone number and email
14. Original consent of sale must be picked up from Boca Lakes Office before closing can take place.
15. Closing agent / Title company is required to fax insurance binder, closing statement and the new warranty deed to Boca Lakes at time of closing.
16. Buyer and seller are responsible for transfer of keys including water lock, door lock, storm shutter and mailbox keys.
17. New owner is required to provide office with NEW keys to the unit – door keys and water lock key.



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### **RE: SALE**

A personal interview between the applicant and the Boca Lakes Director of Sales and Rentals is a mandatory part of the sale process. Please be sure to provide a phone number for the applicant(s). The Boca Lakes Office will contact the applicant to set up a time for the interview. All required paperwork must be completely filled out and the originals must be submitted as a complete packet to the Boca Lakes Condominium Office before an interview will be scheduled.

IN ORDER TO PROCESS YOUR SALE IN A TIMELY FASHION, WE ASK THAT YOUR PAPERS BE COMPLETED QUICKLY. AFTER THE ASSOCIATION CONDUCTS AN INSPECTION OF THE UNIT, ANY VIOLATIONS MUST BE COMPLETED AND PAID FOR BY THE SELLER.

PLEASE NOTE THAT A PERSONAL INTERVIEW AND BACKGROUND CHECKS MUST BE COMPLETED BEFORE CONSENT OF SALE CAN BE GIVEN.

NO BUYER MAY MOVE INTO ANY UNIT BEFORE ALL OF THE ABOVE HAS BEEN ACCOMPLISHED.



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**APPLICATION FOR APPROVAL OF SALE**

UNIT# \_\_\_\_\_

CURRENT OWNER NAME(s): \_\_\_\_\_  
\_\_\_\_\_

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

PRESENTLY RESIDING AT: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

It is understood that the date of this application does not become effective until the original executed Sale Package is on file.

PROPOSED NEW OWNER NAME: \_\_\_\_\_

There is a \$150.00 APPLICATION FEE WHICH INCLUDES BACKGROUND/CREDIT CHECK. Checks are to be made payable to Boca Lakes Condominium Association.

\_\_\_\_\_  
CURRENT Owner Signature (before this sale)      Date

\_\_\_\_\_  
CURRENT Owner Signature (before this sale)      Date

**Sales & Rental Committee Approval:**

\_\_\_\_\_  
\_\_\_\_\_  
Printed Name      Signature      Date





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## **PERSONAL INFORMATION SHEET**

APPLICANT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

NAME OF SPOUSE OR CO-APPLIANT: \_\_\_\_\_

WILL CONDO BE OCCUPIED SOLELY BY APPLICANT AND/OR SPOUSE (Y/N): \_\_\_\_\_

IF 'NOT' Name \_\_\_\_\_ DOB \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_

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

STREET ADDRESS

CITY

STATE

ZIP

HOW LONG?

PHONE

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

STREET ADDRESS

CITY

STATE

ZIP

HOW LONG?

PHONE

OCCUPATION: \_\_\_\_\_ POSITION OCCUPIED: \_\_\_\_\_

EMPLOYER \_\_\_\_\_ RETIRED: Yes / No

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

PETS: \_\_\_\_\_ YES \_\_\_\_\_ NO

### **BUSINESS REFERENCES:**

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_ PHONE: \_\_\_\_\_

### **PERSONAL REFERENCES (NOT RELATIVES):**

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_ PHONE: \_\_\_\_\_

### **EMERGENCY CONTACT:**

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_



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## **PROPOSED OWNER'S AFFIDAVIT**

STATE OF FLORIDA  
COUNTY OF PALM BEACH

BEFORE ME, the undersigned authority, personally appeared

\_\_\_\_\_  
print applicant name(s)

who, being duly sworn, on oath deposes and says:

1. I am the proposed owner of address \_\_\_\_\_ within Boca Lakes, a Condominium; located in Palm Beach County, Florida which is subject to the Declaration of Condominium thereof recorded in Official Records Book 2114 Page 737, et. seq., of the Public Records of Palm Beach County, Florida, as the same has been amended from time to time including but not limited to that certain amendment recorded May 13, 1989, at Official Records Book 5994, Page 1585, Unit \_\_\_\_\_.

2. I hereby certify that the statement checked below is correct:

- A. \_\_\_\_\_ I am 55 years of age or older.  
B. \_\_\_\_\_ I am under the age of 55 years.

3. I have personal knowledge that the Unit is subject to the "Documents" including the Declaration, Articles, Bylaws, and Rules and Regulations of Boca Lakes Condominium Association, Inc., ["Association"], hereinafter collectively ["Documents"], and that compliance with the Documents is required.

4. I hereby confirm and acknowledge that the condominium is "housing for older persons", and that, therefore, the apartment, when occupied must be occupied by at least one person over the age of 55 years.

5. I agree that I shall not rent or lease the Unit for the first 2 years of ownership and after that time not without the approval of the Association.

FURTHER, AFFIANT SAYETH NOT

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Applicant Signature

SWORN TO AND SUBSCRIBED before me this \_\_\_\_\_ day of, \_\_\_\_\_, \_\_\_\_\_  
Month Year

(NOTARY SEAL)



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### **BUYER'S RESPONSIBILITY**

\_\_\_\_\_  
Unit Number

I understand that any damages created by modifications/additions made by the prior unit owner(s) are not the liability of the Condominium Association but are the sole responsibility of the new Unit Owner(s).

The current unit owner(s) are responsible for removing any unapproved modification/alteration made to the unit and/or building before the Association will approve this sale.

\_\_\_\_\_  
Applicant Name (print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Name (print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date





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### **RULES & REGULATIONS – SALES & RENTALS**

Rules and Regulations include, but are not limited to the following.

1. It is understood that the Condominium Documents provide that the Unit Owner or Renter shall occupy and use the unit as a single-family private dwelling. No children under eighteen (18) years of age shall be permitted to reside in any of the units' rooms thereof in this Condominium, except that children and social guests may be permitted to visit and temporarily reside for reasonable periods in any calendar year. Reasonable periods are defined as no more than thirty (30) days in any calendar year.
2. During the absence of the Unit Owner, only the owners' parents, children and siblings, over the age of 18, may occupy the unit for a period of no more than 30 days. Written notification and documentation must be submitted to the Boca Lakes Condominium office prior to their arrival, for Association approval.
3. The Association must approve all sales & rentals. At NO time will the Association allow occupancy prior to approval.
4. Regarding the lease (rent) of a unit, under no circumstances, including breach of the lease by the Lessee, or authorization by the Lessee, will the owner, his family, or his designees, occupy the leased premises during the stated term of the Lease. Owner gives up his right to the use of the condo facilities during the lease period.
5. The speed limit throughout the condominium property is 15 miles per hour.
6. Vehicles must be pulled into parking space, so that the back of car faces street – no backing in.
7. There is a 2-vehicle limit per unit. No pick-up trucks or commercial vehicles are allowed to park overnight on property.
8. No motorcycles, mopeds, electric scooters, electric bikes, RVs, campers and trailers are allowed on property.
9. No items can be attached, hung or affixed to the exterior of the buildings.
10. Nothing can be planted and/or no plants can be removed from the outside the unit without the approval of the Association.
11. No modification or alterations of any kind may be made to the exterior of the building and/or the common areas.
12. Violation of any Boca Lakes Condominium Rules, Regulations and By-Laws may subject the violator to fines.
13. It is the owner's responsibility to read the full set of Boca Lakes Governing DOCs which contain the Associations By-Laws and a complete set of Rules and Regulations to abide by.
14. It is the owner's responsibility to inform renter of all Rules and Regulations. If renters violate any of the Rules and Regulations, the owner is responsible for all penalties.

**I (we) agree to abide by all the Condominium Documents including the Declaration of Condominium, By-Laws, Rules & Regulations, and any amendments or addenda approved by the Board of Directors of Boca Lakes Condominium Association, Inc.**

\_\_\_\_\_  
Applicant Name (print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Name (print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



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## **ASSOCIATION CONSENT FOR SALE**

**Consent of Sale Document will be issued prior to the closing date.**





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### **New Owner Gate Information Sheet For Boca Lakes Condominium**

#### **NEW Owner(s):**

Unit # \_\_\_\_\_ Address: \_\_\_\_\_

#### **Owner #1:**

Last: \_\_\_\_\_ First: \_\_\_\_\_

Unit Phone#: \_\_\_\_\_ Alt Phone # : \_\_\_\_\_ Work Phone: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Plate #: \_\_\_\_\_

(for office use) RFID# \_\_\_\_\_ BLC DECAL # \_\_\_\_\_

#### **Owner #2**

Last: \_\_\_\_\_ First: \_\_\_\_\_

Unit Phone#: \_\_\_\_\_ Alt Phone # : \_\_\_\_\_ Work Phone: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Plate #: \_\_\_\_\_

(for office use) RFID# \_\_\_\_\_ BLC DECAL # \_\_\_\_\_



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### **New Owner Information Sheet For Boca Lakes Condominium**

New Owner Name (1<sup>st</sup>) \_\_\_\_\_ Unit #: \_\_\_\_\_ Date: \_\_\_\_\_

New Owner Name (2<sup>nd</sup>) \_\_\_\_\_ New Owner Name (3<sup>rd</sup>) \_\_\_\_\_

Email address: \_\_\_\_\_

Address: \_\_\_\_\_ Phone # in unit: \_\_\_\_\_

Cell Phone \_\_\_\_\_ Whose phone, is it? \_\_\_\_\_

Cell Phone \_\_\_\_\_ Whose phone, is it? \_\_\_\_\_

Work Phone: \_\_\_\_\_ Whose phone, is it? \_\_\_\_\_

**If you are a seasonal resident or your mailing address is other than Boca Lakes, please provide the following information:**

Alternate Address: \_\_\_\_\_

City, State Zip \_\_\_\_\_ Circle one: alt address of 1<sup>st</sup>, 2<sup>nd</sup> or 3<sup>rd</sup> owner?

Home Phone at Alternate Address \_\_\_\_\_ Fax #: \_\_\_\_\_

**In an emergency, please notify:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

City, State Zip \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

City, State Zip \_\_\_\_\_ Cell Phone # \_\_\_\_\_

If someone other than the owner of record is occupying the property, please provide the following information:

Name of Occupant: \_\_\_\_\_

Relationship to Owner (Relative, Renter): \_\_\_\_\_

**Our condominium documents require the office to have a certificate of insurance for every Boca Lakes Condominium unit. Whenever your policy renews your insurance agent should fax a certificate of insurance to 561-372-9819.**

Insurance Company \_\_\_\_\_ Policy#: \_\_\_\_\_ Exp date: \_\_\_\_\_



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### **INSURANCE INFORMATION**

Boca Lakes Condominium Association, Inc. has an amendment to our documents that requires all owners to purchase hazard and liability insurance for the inside of the unit:

***"Each individual Unit Owner shall be responsible for purchasing, at his own expense, liability insurance to cover accidents occurring within his own Unit, and for purchasing insurance upon his own personal property. In addition, each Unit Owner shall obtain and maintain a policy of homeowner's insurance insuring floor, wall and ceiling coverings, as well as electrical fixtures, appliances, air-conditioning and heating equipment, water heaters, built in cabinets and any other item excluded from the Association insurance coverage pursuant to Section 718.11(11) Florida Statutes, as amended from time to time. A copy of the Certificate of said insurance shall be filed with the Association office."***

The legal address of our Association is:

**BOCA LAKES CONDOMINIUM ASSOCIATION, INC.**

**8768 Chevy Chase Drive, Boca Raton, FL 33433**

Certificates of insurance may be faxed to us at 561-372-9819 or emailed: [bocalakesoffice@gmail.com](mailto:bocalakesoffice@gmail.com) by your insurance company.

While it is no longer a Florida State Law, we still encourage all unit owners to purchase \$2,000 worth of loss assessment coverage. It is not very costly, but if the Association levies an assessment for disaster losses, your insurance would cover up to \$2,000.

**Please note – After January 1<sup>st</sup>, 2009 – Rental Applications will not be started, processed, nor will an interview be scheduled until an insurance certificate is faxed by your insurance company to the Boca Lakes Condominium office @ 561-372-9819. This insurance policy must be currently in effect. No future dated policies will be accepted.**

**In the case of a sale application, the insurance binder will be required to be faxed to the Boca Lakes Condominium Office @ 561-372-9819 one week prior to closing.**



**BROWN'S BACKGROUND CHECKS**  
**CONSENT TO OBTAIN CONSUMER REPORT ON SUBSCRIBER**  
**Boca Lakes Condominium Association Inc.**

I understand that you may obtain consumer reports that relate to my credit and/or criminal history. This information will, in whole or in part, be obtained from AISS, a Sterling Infosystems Company, 6111 Oak Tree Blvd, 4<sup>th</sup> floor, Independence, OH 44131, telephone 800.853.3228. I understand that you may be requesting information from various federal, state and other agencies or institutions, which maintain public and non-public records concerning my past activities relating to my credit and/or criminal history. This information will be reviewed by the Association and may be reviewed by a unit owner if it's a rental.

I authorize, without reservation, any party, institution, or agency contacted by AISS to furnish the above mentioned information:

Applicant Name \_\_\_\_\_ Date of Birth\* \_\_\_\_\_ Social Security Number \_\_\_\_\_  
\*Date of Birth is requested in order to obtain accurate retrieval of records. If International please provide Passport Number

Co-Applicants Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_  
If International please provide Passport Number

Alias/Previous Name(s) \_\_\_\_\_

Current Physical Address \_\_\_\_\_ City & State \_\_\_\_\_ Zip code \_\_\_\_\_

**California, Minnesota & Oklahoma Applicants Only:** Please check here to have a copy of your consumer report sent directly to you. \_\_\_\_\_

**Notice to CALIFORNIA Applicants**

Under Section 1786.22 of the California Civil Code, you have the right to request from AISS, upon proper identification, the nature and substance of all information in its files on you, including the sources of information, and the recipients of any reports on you, which AISS has previously furnished within the two-year period preceding your request. You may view the file maintained on you by AISS during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services. Upon making a written request, you may receive a summary of your report via telephone.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Co-Applicant  
SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_