

HARBOUR POINTE OF MIAMI CONDOMINIUM ASSOCIATION, INC.  
1251 NE 108 ST MIAMI FLORIDA 33161  
(305)893 6820 FAX (305)892-1409  
Harbourpointe.office@gmail.com  
<http://www.harbourpointecondominium.com>

**SALE / LEASE APPLICATION PACKAGE**  
**\*\*\* ALLOW 30 DAYS TO PROCESS\*\*\***

**This application is made with the full consent and  
knowledge of the Owner, as follows:**

**Unit Number:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Sale:** \_\_\_\_\_

**Rental:** \_\_\_\_\_

**Owner's Name:** \_\_\_\_\_

**Owner's Signature:** \_\_\_\_\_

**Buyer's Name:** \_\_\_\_\_

**Buyer's Signature:** \_\_\_\_\_

**Lessee's Name:** \_\_\_\_\_

**Lessee's Signature:** \_\_\_\_\_

**UNITS ARE NOT ALLOWED TO HAVE PETS**

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**SALE / LEASE APPLICATION PACKAGE**

**THE FOLLOWING REQUIREMENTS MUST BE MET IN ORDER TO SELL OR LEASE  
YOUR UNIT/APARTMENT WITHIN THE ASSOCIATION:**

- I- A One Hundred Fifty Dollars **(\$150.00)** (**non-refundable**) Application Fee **per single applicant** is required with the return of the completed application package. Local Checks, Cashier Checks or Money Orders are the only acceptable form of payment.
- II- **IF A SECOND ADULT WILL BE PURCHASING / RENTING THE PREMISES THEY WILL NEED TO COMPLETE A SEPARATE RENTAL APPLICATION FORM INCLUDING THE \$150.00 (NON-REFUNDABLE FEE).**
- III- Checks are to be made payable to: **Harbour Pointe of Miami Condominium Association**
- IV- The Fee for an **ESTOPPEL** Letter is **\$250.00**. The Fee for a **CONDO QUESTIONNAIRE** is **\$250.00** – both Payable to: **Harbour Pointe of Miami Condominium Association**
- V- A fully completed application for residency must be returned and **signed** by the **Seller/Owner** and prospective **Buyer** or **Lessee**.
- VI- A copy of the Sales Contract or Lease must be attached to the application package.
- VII- A Credit and Criminal Background Investigation of **each adult** applicant will be requested and reviewed before an interview is scheduled.
- VIII- Upon receipt and verification of the application package, a personal interview will be scheduled with the Screening Committee or Board Member. The applicants will be notified of the time, place and date of screening interview.
- IX- Occupancy **MAY NOT** Occur until screening has been completed and a **Certificate of Approval** has been issued.
- X- Please allow a minimum of twenty days (20 days) prior to the estimated closing and/or move-in date to properly process your application. (apply only for sale )
- XI- All Applications should be mailed to:

**Harbour Pointe of Miami Condominium Association, Inc.**  
**1251 NE 108<sup>th</sup> ST - Miami, Florida 33161**

Or Faxed to: **(305) 892-1409**

Thank you for your cooperation. Should you have any questions or concerns, please feel free to contact the Management Company at: **harbourpointe.office@gmail.com** (305) 893-6820.

## **Instructions & Checklist**

### **Residential Buyer and Rental Application**

☐ This package contains (1) Instructions & Checklist for Residential Rental Application; (2) Information for Residential Buyer and Rental Application; and (3) Residential Buyer and Rental Application;

☐ The buyer/rental application should be signed by the prospective buyer/tenant and by any spouse that will be residing on the premises.

☐ If a second adult will be renting the premises, they should complete a separate rental application form.

☐ The Association should perform a thorough investigation of the prospective Buyer/Renter (and Tenant's spouse) based on the information provided in the Application. The Association should keep copies of any correspondence relating to the Application and written notes of any telephone conversations with and relating to the prospective Tenant(s).

☐ Proper Identification will be required (i.e. drivers' license, passport etc...) from the applicant after the application is completed.

☐ The Association should make sure that all the information provided by the prospective Tenant(s) "makes sense" and that everything matches (i.e. Drivers' license information matches information on application etc...)

☐ The Association should keep the original Application.

☐ A copy of the Application may be provided to the prospective Tenant.

☐ If an Applicant does not meet the Association's criteria, The Association should document the reason for the decision. Decisions to reject an Application should be made in good faith and for legitimate legal purposes.

☐ The Association will not discriminate against any Applicant on any illegal or unlawful basis, including race, color, religion, sex, national origin, age, disability, family status, sexual orientation or any other basis prohibited by local and/or state laws.

**SECTION – XVII**  
**SALES AND RENTAL PROCEDURES/APPLICATION**

1. No unit may be rented, transferred or sold without the approval of the Board of Directors. Such approvals are to be withheld until all financial obligations owed to the Association are satisfied. A CERTIFICATE of APPROVAL issued by the Association is required.
2. There will be a flat non-refundable screening-processing fee of \$150.00 per couple, any additional adults an additional screening fee of \$150.00 for Sales and Rentals. The Officers of the Association with the assistance of Management Office will conduct the screening process. Failure to follow sales and rentals guidelines will result in a \$1,000.00 penalty, which will be assessed to the owner.
3. Moving arrangements must be made in advance with the office to prevent congestion and inconvenience. There will be \$500.00 – Move in/out and general damaged deposit to be made 48 hours in advance. The Deposit will be refunded when you within two weeks of moving out (excluding Saturdays/Sundays or Holidays), provided not damaged or fines has been levied against the unit, this will allow time for inspection of premises. Movers must unload items to the lobby and release the elevator immediately. No moving is permitted on Saturdays/Sundays and Holidays or after 4:00 P.M. Monday – Friday moving is defined as permanently moving-in or out of a unit. Deliveries are allowed as long as they are done within reasonable hours Monday – Friday between the hours of 8:00 A.M. and 4:00 P.M. Elevator pads must be obtained from the Office for all moves.
4. The following limitations to unit density will prevail:  
  
One-bedroom units are limited to three (3) persons with a maximum of two (2) adults.  
Two-bedroom units are limited to four (4) persons of which at least one (1) must be an adult.  
Three-bedroom units are limited five (5) persons in which at least one (1) must be an adult.



# Harbour Pointe of Miami Condominium Association, Inc.

Date: \_\_\_\_\_

Apartment #: \_\_\_\_\_

## RESIDENTIAL SALE OR RENTAL APPLICATION

<b>Current Owner / Landlord:</b>	
Address of Rental Property: 1251 NE 108th ST – APT# _____, Miami, FL 33161	
Desired date of occupancy: _____	Desired length of occupancy: _____

### APPLICANT INFORMATION

<b>Name:</b>		<b>Date of Birth:</b>
Social Security No.: - -	Driver's License No:	
Cell Phone No:	Issuing State:	
Home Phone No.:	Expiration Date:	
Email:		

### RENTAL / RESIDENCY HISTORY

Present Address	
How long at present address	Home Phone No.: ( )
Current rent payment:	Reason for moving
Landlord's Name:	Phone No.:

Prior Address	
How long at prior address	
Current rent payment:	Reason for moving
Landlord's Name:	Phone No.: ( )

### SPOUSE INFORMATION (if applicable)

<b>Name of Spouse:</b>		<b>Date of Birth</b>
Social Security No.: - -	Driver's License No:	
Cell Phone No:	Issuing State:	
Home Phone No:	Expiration Date:	
Email :		

### NAMES OF OTHER TENANTS, INCLUDING CHILDREN AND ANYONE WHO WILL LIVE WITH YOU (EVEN ON A TEMPORARY BASIS)

No. of occupants:	Adults:	Children:
Name	Adult: <input type="checkbox"/> Child's Age:	
Present Address	Home Phone No.: ( )	
How long at present address:	Relationship:	
Occupation:	School:	
Name	Adult: <input type="checkbox"/> Child's Age:	
Present Address	Home Phone No.: ( )	
How long at present address:	Relationship:	
Occupation:	School:	
Name	Adult: <input type="checkbox"/> Child's Age:	
Present Address	Home Phone No.: ( )	
How long at present address:	Relationship:	
Occupation:	School:	

Date: \_\_\_\_\_

Apartment #: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

#### VEHICLES

Vehicle Model:	Year:	Vehicle Model:	Year:
License No.:		License No.:	

#### MISCELLANEOUS

Water bed:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Smokers:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Do you own real estate? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain where:

Have you ever been evicted from any rental premises? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain:

Have you ever willfully and intentionally refused to pay rent when due? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain:

Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain:

#### CURRENT EMPLOYER:

Employer:	Business Phone: (     )
Position	How long:
Supervisor	Annual Income
Email :	
Other Income sources: Gov't assistance \$    Child support/Alimony\$                      Other \$	

#### SPOUSE'S CURRENT EMPLOYER:

Employer:	Business Phone: (     )
Position	How long:
Supervisor	Annual Income
Email:	
Other Income sources: Gov't assistance \$    Child support/Alimony\$                      Other \$	

#### NEAREST RELATIVE NOT LIVING WITH YOU:

Name	
Address	
Relationship	Home Phone No.: (     )
Email :	

#### CREDIT/PERSONAL REFERENCES:

Name:	Name:
Address:	Address:
Phone No.:	Phone No.:
Relationship:	Relationship:

Date: \_\_\_\_\_

Apartment #: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

**BANK REFERENCES:**

Name:	Name:
Branch:	Branch:
Account No.:	Account No.:

The Association does not discriminate against any applicant on the basis of an illegal purpose including, race, color, religion, sex, national origin, age, disability or family status. Such discrimination as the sole basis of refusal to rent is illegal throughout the United States. Local or State laws may provide additional protected classes from discrimination. You can call the U.S. Department of Housing and Urban Development (HUD) at 1-800-424-8590 to ask questions about discrimination.

I represent that the information provided in this Application is true and correct to the best of my knowledge.

I understand that this Application is not a buyer or rental agreement and that this Application does not create any obligation on the Association.

I understand that the information provided might be used by the Association to determine whether to accept this Application. I authorize the Association to verify all the information given in this application, including banking and personal references and employment information provided.

**I also authorize the Association to perform a credit check and a criminal history check. I consent to the release of information relating to my credit and the information provided in this application.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse/Co-Applciant's Signature

\_\_\_\_\_  
Date

**FAILURE TO PROPERLY COMPLETE AND SIGN THE  
APPLICATION WILL RESULT IN DENIAL OR DELAY OF THE APPLICATION.  
COPIES OF THE FOLLOWING DOCUMENTS ARE REQUIRED:**

- 1- (2) Personal Reference Letters.
- 2- The last Bank Statement
- 3- New Owners, show Bank's Approval or Bank Statement showing cash for purchases in cash.
- 4- Bring a Valid ID (Driver's License, Passport, etc.)
- 5- Copy of Contract for SALE AND PURCHASE / LEASE AGREEMENT
- 6- Lease Addendum
- 7- **UNITS ARE NOT ALLOWED TO HAVE PETS.**