

INTERNATIONAL BEACH CLUB d/b/a FOUNTAIN BEACH RESORT

PURCHASE APPROVAL APPLICATION

PLEASE FILL OUT COMPLETELY – Incomplete applications will not be processed.

PROPERTY APPLYING FOR UNIT #: _____

Sales Associate Name (First)	(Last)	Phone #:
E-mail Address:	Fax #:	Anticipated Closing Date:
Title Company Name:		Telephone #:
Closing Agent Name (First)	(Last)	Direct phone #:
E-mail Address:	Fax #:	Copy of Executed Sales Contract Attached: YES NO

SELLER INFORMATION

Owner Name (Last)	(First) (Middle)	Phone #:
Address:	City	State:
E-mail Address:		Zip Code:

APPLICANT INFORMATION

Applicant Name: (Last, First)	Date of Birth:	E-Mail Address:
Driver's License #:	State Issued:	Phone #:
Current Address:	Apt #:	City, State, Zip
Present Employer:	Employer Phone #:	
Employer Address:	Suite #:	City, State, Zip:
Supervisor's Name:	Length of Employment:	

VEHICLE INFORMATION: (Please list all vehicles that belong to occupants)

Automobile Make:	Model:	Year:	License Plate #:	State Issued:
Automobile Make:	Model:	Year:	License Plate #:	State Issued:

MISCELLANEOUS INFORMATION

Emergency Contact Name:	Phone #:	Relationship:
Address:	City:	State, Zip

REFERENCES

Contact Name:	Phone #:	Relationship:
Contact Name:	Phone #:	Relationship:

Application statement (Each statement MUST be initialed by applicant)

I understand that a **Simple Criminal Background Check Report and Credit History Verification** will be processed **prior** to Association Approval: (_____)

I have obtained and reviewed a copy of the Association Declaration of Covenants and Restrictions; I understand the documents and agree to abide by the Rules and Regulations set forth and I will ensure all persons using the premises under my permission will abide by these rules. I further understand that failure to comply with any of the provisions of the Declaration of Condominium, By-laws and the Rules and Regulations may result in fines being levied against the unit: (_____)

I understand that I may **NOT** reside permanently at the condominium, and that owner occupancy shall not exceed more than 182 days per 12-month period. Association approval is required for all rentals that exceed 30 days: (_____)

I understand that The Oasis at Fountain Beach Resort, LLC is the exclusive rental agent of the Association: (_____)

I understand that any outside service personnel (maintenance, housekeeping, etc.) used by owners to maintain their units must be properly screened (criminal background check performed), be properly licensed and bonded, and must register at the front desk prior to admission to owner unit: (_____)

I understand that there shall be NO PETS on the premises at any time with the exception of properly documented service animals as described under ADA guidelines (Emotional Support animals do not qualify as service animals): (_____)

I understand that a written application and Association approval is required **PRIOR** to any unit renovation: (_____)

I warrant and attest that I am at least 18 years of age and that all statements herein are true and correct: (_____)

Signature of Applicant: _____ Date: _____

A COPY OF THE EXECUTED SALES CONTRACT IS REQUIRED FOR ASSOCIATION APPROVAL

We require at least 10 business days for processing and obtaining the required board member signature. Seller/Sellers' agent is responsible for providing the applicant with a copy of the Association Declaration of Covenants and Restrictions (CC&Rs). If the owner should need to obtain a copy of the CC&Rs please e-mail _____ to request the documents for immediate download.

APPLICATION CHECK LIST:

Complete Application:	
Background & Credit Check required. Fee is \$75 per person on the contract	
Copy of Valid Driver's License:	
Copy of Vehicle Registration:	
Copy of Executed Contract:	
Participating in Rental Program:	
Copy of Insurance with \$300,000 liability coverage with Association named as an additionally insured	

Association Approval: (Print Name)

Signature:	Position:	Date:
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International Beach Club d/b/a Fountain Beach Resort
313 S. Atlantic Avenue
Daytona Beach, FL 32118
Unit _____