**ALAFIA COVE HOMEOWNER’S ASSOCIATION**

**PO BOX 2581 BRANDON, FL 33509**

**BUYER OR RENTER APPLICATION CHECKLIST**

**Please Note:**

* Married Couple, with or without minor child(ren): Submit one complete application and $100 fee
* One Adult, with or without minor child(ren): Submit one complete application and $100 fee
* Unmarried Adults, with or without child(ren): **Submit two complete applications and $100 fee per adult.**

**Processing time can take up to 4 weeks. Rush request for applications cost $35 for applicants in the U.S. (no rush is available for applications outside the U.S.).**

Check or Money Order made out to: Alafia Cove Homeowner’s Assoc. **NO CASH ACCEPTED**. For out of country residents, fees will vary depending on country.

1. Signature(s)
2. Copy of Florida Driver's License or State issued ID Card(s)/Passport
3. Social Security Number(s)
4. Telephone Number(s) for Applicant(s)
5. E-mail address(es) for Applicant(s)
6. Complete present address
7. **Check or Money Order payable to Alafia Cove HOA.** **NO CASH!**
8. Copy of Settlement statement, Management Agreement, or Lease (for renters)
9. Signed Rules and Regulations for Alafia Cove

A copy of approved application is to be sent to:

Name: Phone:

Address: Fax:

E-mail:

**ALAFIA COVE HOMEOWNER’S ASSOCIATION**

**APPLICATION FEE SCHEDULE**

Please note that the applicant(s) are responsible to follow all rules and regulations. Any owner/tenant violating same will subject the owner to liability of eviction, fines, costs and attorney's fees.

Please fill out the enclosed forms and send them to the association’s office with application fee(s) as follows:

* Married Couple, with or without minor child(ren): Submit one complete application and $100 fee
* One Adult, with or without minor child(ren): Submit one complete application and $100 fee
* Unmarried Adults, with or without child(ren): **Submit two complete applications and $100 fee per adult.**

**For out of country residents’ costs will vary depending on country**. **NO RUSH AVAILABLE ON ANY APPLICATIONS OUTSIDE THE USA/FOREIGN COUNTRIES**

**ALL FEES ARE TO BE MADE BY CHECK OR MONEY ORDER PAYABLE TO: ALAFIA COVE HOA.** **NO CASH WILL BE ACCEPTED**.

Thank you for adhering to these requirements as set forth in the Governing Documents of the Homeower’s Association.

Respectfully,

Janice Powell, LCAM

e-mail: [info@jpowellenterprises.com](mailto:info@jpowellenterprises.com)

**(813) 409-3813 O. (813) 409-2086 F.**

**PLEASE NOTE:** **APPLICATIONS WILL NOT BE PROCESSED UNTIL ALL DOCUMENTS ARE SUBMITTED AND ALL REQUIRED FEES ARE PAID. NO EXCEPTIONS.**

**\*\* A COPY OF A SIGNED LEASE AND BOARD APPROVAL IS REQUIRED PRIOR TO MOVE IN\*\***

**APPLICATION FOR PURCHASE OR RENTAL**

***Unmarried Co-Applicants fill out a separate application. Do NOT leave any blank spaces.***

Occupant 1: SS#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name First Name Middle Name

DOB: \_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_ Driver’s License#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_

(Copy must be attached to application)

Phone (\_\_\_) \_\_\_\_-\_\_\_\_\_\_\_\_\_\_ E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupant 2: SS#:

Last First Middle

DOB: \_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Driver’s License #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_ (Copy must be attached to application)

Phone (\_\_\_) \_\_\_\_-\_\_\_\_\_\_\_\_\_\_ E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Minor’s under 18:

Name: DOB:

Name: DOB:

Name: DOB:

Present Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street City State Zip

From \_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_

**If Buying**

Realtor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title Company:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact person: \_\_\_\_\_\_\_\_\_\_\_\_\_

Phone#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If Leasing:**

Management Company/Owner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever had adjudication withheld? Have you ever been convicted of a crime?

Applicant: Yes \_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_ Spouse: Yes \_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_

If you answered yes to the above question and/or there is any other information you would like to provide, please do so on the back of this sheet.

**AUTHORIZATION OF RELEASE OF INFORMATION** - Applicant(s) represent(s) that all of the above information and statements on the application for purchase/rental are true and complete and hereby authorizes an investigative consumer report including, but not limited to: residential history (mortgage or rental), employment history, criminal history records, court records and credit records. **This application must be signed before it can be processed by Association Management.** Applicant acknowledges that false or omitted information herein may constitute grounds for rejection of this application, termination of right of occupancy, and/or forfeiture of fees and/or deposits and may constitute a criminal offense under the laws of this State.

**NON-REFUNDABLE APPLICATJON FEE** - Applicant(s) agree(s) to pay $\_\_\_\_\_\_\_\_ for a non-refundable application processing fee. **\*Note: Pricing of fees may vary per applicant and country. \***

Signature: Date:

Occupant 1

Signature: Date:

Occupant 2

Is this a lease: Yes: No:

**PLEASE ATTACH A COPY OF SETTLEMENT STATEMENT AND/OR LEASE IF APPLICABLE. IF LEASING PROPERTY PLEASE PROVIDE INFORMATION BELOW (IF APPLICABLE):**

Management Company:

Contact Phone Number: Contact Person:

**ASSOCIATION APPROVAL OF PURCHASER/TENANT**

Property Address:

Tenant/ Buyer:

Owner/Seller:

**Pursuant to the Declaration of Homeowner’s Association, the Board of Directors of Alafia Cove Homeowner’s Association, Inc., has approved the purchase/lease of the above unit, and do hereby confirm the same by this document.**

Board Member Approving:

Witnessed By:

Date BOD Ratified:

Legal Counsel Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If applicable)