

# Sale / Lease Application Packet

*Any individual(s) residing in Villas of Pinecrest without this approved form can be fined up to a \$1,000.00*

Welcome to the Villas of Pinecrest. We hope that you enjoy living in your community.

Generally, the approval process takes 14 days from the time your complete application packet is submitted. Please include a check in the amount of \$100.00, payable to the Villas of Pinecrest Condo Association, along with the items listed below.

We now offer expedited approval service. If you need your approval done in 3-5 business days, please include a check for \$125.00 along with the items listed below.

Items:

1. Complete the application packet:
  - \_\_\_\_\_ Fill out the Credit Reference Report
  - \_\_\_\_\_ Fill out the Unit Owner Information Form
  - \_\_\_\_\_ Sign and Notarize the Release/Hold Harmless Agreement
  
2. Include a copy of the Sale / Lease Contract.
  
3. Optional, but strongly recommended... Each unit owner should have their own Interior Contents, Liability & Interior Building Insurance. While the Association provides insurance for the outside common elements, you are solely responsible for having your own insurance protection for your individual unit.
  
4. Payment In Full
  - \_\_\_\_\_ Normal processing fee is \$100.00 or \$125 for expedited processing
    - Fees are per applicant per unit.
    - Pet registration fee is \$50.00 (not to exceed 1 pet / unit, limit 35 lbs.)
    - Husband, wife and children under eighteen years of age, will require only the head of household to apply.

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**Sale Only:**

- **PUD forms:** These are done by the management company and fees and completion time are dictated by them. Estimated time to complete is approx. 48 hrs and there is a \$200.00 PUD form fee.
  
- **Estoppel Letters:** These are done by the Management/Accountant, fees and completion time is dictated by them. Estimated time to complete is approx. 48 hrs and there is a \$200.00 Estoppel Letter fee.

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By signing I do hereby testify that all information submitted is correct to the best of my knowledge and that I have received, read and shall comply with all Rules and Regulations of the Villas of Pinecrest.

Applicant Signature: \_\_\_\_\_  
Sign
Print
Date

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OFFICE USE ONLY: Rec'd: \_\_\_\_\_ Processor: \_\_\_\_\_

# Villas of Pinecrest Condominium

## Credit Reference and Background Information

The person filling out this form should be the one responsible for making either the mortgage payments or the rent payment each month.

Is this application for Purchase or Rent: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Current Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

### **References:**

Name	Relationship	Phone Number
1. _____		
2. _____		
3. _____		

### **Work Information:**

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Title

\_\_\_\_\_  
Supervisor

### **Background:**

Have you ever been arrested? \_\_\_\_\_  
If yes explain: \_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_  
If yes explain: \_\_\_\_\_

Have you ever had a civil action placed against you? \_\_\_\_\_  
If yes explain: \_\_\_\_\_

Have you ever declared bankruptcy? \_\_\_\_\_

I hereby authorize the release of information to the Credit Agency, Board of Directors and the Management Company of the Association and its respective residents concerning my banking, credit, residence, employment or police records in reference to the application for housing.

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

\_\_\_\_\_  
Date

# Villas of Pinecrest Condominium

## Unit Information Form

### Owner

Unit No \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_ Country \_\_\_\_\_ Email \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_ Mobile # \_\_\_\_\_

### Tenant (Only approved ones)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

E-mail \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_ Mobile # \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone # \_\_\_\_\_

#### Other Residents

#### Authorized Visitors

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Pets

Select: Yes or No      How many? \_\_\_\_\_

Type: \_\_\_\_\_ Breed \_\_\_\_\_ Color: \_\_\_\_\_ Weight: \_\_\_\_\_

Most Recent Vaccination Date: \_\_\_\_\_

### Vehicle Information

#### Vehicle 1

#### Vehicle 2

VOP Decal No \_\_\_\_\_

VOP Decal No \_\_\_\_\_

Year \_\_\_\_\_ Make & Model \_\_\_\_\_

Year \_\_\_\_\_ Make & Model \_\_\_\_\_

Color \_\_\_\_\_ License Tag No \_\_\_\_\_

Color \_\_\_\_\_ License Tag No \_\_\_\_\_

**VILLAS OF PINECREST CONDOMINIUM ASSOCIATION  
HOLD HARMLESS AGREEMENT**

This Release, Indemnity and Hold Harmless Agreement ("Agreement") is executed this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ by \_\_\_\_\_ and the owners and/or residents of Unit \_\_\_\_ in Building \_\_\_\_\_.

In consideration for the Association's approval of the following renovation and/or improvement and/or moving in/out (hereinafter the "Improvement") to the above referenced Unit:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The Owners/Residents agree as follows:

1. The Owners/Residents shall be responsible for any damages to the Association's Common Property as such term is defined in the Association's Declaration of Condominium, including but not limited to the Association's Catwalks, or to any Units resulting from the installation or construction of the Improvement, including any damages caused by any agents, employees or contractors of the Owners/Residents. The Owners/Residents agree to pay for the cost of any damages caused by the installation or construction of the Improvement within ten (10) days of notice from the Association of the cost to repair said damages.

2. The Owners/Residents hereby release, indemnify and hold harmless the Association and its directors, officers, agents and employees, lessees, guests and invitees and all members of the Association and their tenants, guests and invitees from and against all claims, damages, losses and expenses arising out of or resulting from the Improvement.

3. In the event the Owners/Residents should violate any of the provisions of this Agreement, the Association shall be entitled to pursue any and all appropriate legal remedies. In connection with any litigation, including appellate proceedings, arising out of this Agreement, the Owners/Residents shall be responsible for attorney's fees and costs incurred.

4. Unit owner (applicant) hereby agrees and fully grants the board of directors (and their respective agents and/or assignees) access to their respective unit for inspections and documenting (taking pictures) of work performed.

IN WITNESS WHEREOF, the undersigned have executed this Agreement the day and year set forth above.

Witnesses:

Owners/Residents:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

STATE OF FLORIDA)  
COUNTY OF DADE)

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ by \_\_\_\_\_, (who are personally known to me) / (who have produced \_\_\_\_\_ as identification) and (did) / (did not) take an oath.

Signature: \_\_\_\_\_

Name:

My Commission Expires:

\_\_\_\_\_