EAST LAKES IN PEMBROKE PINES

HOMEOWNERS' ASSOCIATION, INC.

NEW OWNER PACKET

Welcome to East Lakes. To obtain Board approval, **every owner listed on the sales contract** must complete the attached forms and submit them with the items below.

WHAT TO SUBMIT

- ☐ Copies of government-issued photo ID for each applicant
- ☐ Copies of the last two paycheck stubs
- ☐ Last month's bank statement – *first page only*, showing account number and balance
- ☐ A fully executed copy of the sales contract, with all addenda and exhibits
- ☐ **$100.00 non-refundable application fee** per single owner ***or*** per legally married couple – checks or money orders only, payable to East Lakes HOA
- ☐ Pet pictures (dog or cat)
- ☐ Completed forms in this packet: Occupancy Form, Application for Occupancy, and Associated Credit Authorization Form

Additional adult occupants. Any additional occupant age 18 or older must complete the **Occupant Authorization Form** and submit a separate $100.00 application fee. Please contact the office to obtain this form.

Plan ahead: screenings may take 2–4 weeks. Submit your complete application well before your closing date. Incomplete applications will delay approval.

QUESTIONS? CONTACT THE EAST LAKES OFFICE

Office hours	Monday – Friday, 9:00 A.M. – 2:00 P.M.
Phone	(954) 432-6888
Email	EastLakesHOA@outlook.com
Website	www.eastlakeshoa.com

EAST LAKES IN PEMBROKE PINES

HOMEOWNERS' ASSOCIATION, INC.

PROSPECTIVE SALE NOTICE

Homeowners and realtors buying or selling a unit in East Lakes in Pembroke Pines should know that the Declaration of Covenants and Restrictions sets requirements that must be met before the Board will approve a sale and issue a **"CONSENT TO CONVEYANCE OF DWELLING UNIT."**

FINANCIAL GROUNDS FOR DENIAL

The Board of Directors may deny the purchase or sale of a unit if any of the following financial conditions exist, as provided in **Article II-A, Section 23(C)(3)(f)** of the Declaration:

> ***(f) Financial Problems.***
>
> *The person seeking approval (including all proposed occupants or applicants legally responsible, or who will be legally responsible to the Association, for payment of assessments or charges) … has a history of not paying monetary obligations, has a poor credit history, has a bad credit rating of 650 or less, has owned real property that was foreclosed in the last seven (7) years, has owned real property sold by short-sale in the last seven (7) years, has owned real property conveyed by a deed in lieu of foreclosure in the last seven (7) years, or has declared bankruptcy (voluntarily or involuntarily) in the last seven (7) years.*

These standards are part of the recorded Covenants and Restrictions and are applied equally to every applicant.

OTHER GROUNDS FOR DENIAL

Financial problems have been the most common reason for denial, but they are not the only one. The Declaration also allows denial for:

Criminal history	Certain convictions, or sexual offender / predator status (§23(C)(3)(a))
Governing documents	Conduct showing the applicant has acted or intends to act against the governing documents (§23(C)(3)(b))
Nuisance	A history of disruptive behavior or disregard for others' rights or property (§23(C)(3)(c))
No cooperation	Missing information, misrepresentation, unpaid fee, missed interview, or refusal to release the background report (§23(C)(3)(d))
Delinquency	Unpaid assessments, charges, fines or other sums owed to the Association (§23(C)(3)(e))

OWNERSHIP AND USE

- Each unit must be owned by a single family and used as a single-family residence.
- Units may be owned only by individuals. Corporations, LLCs, partnerships and land trusts may not own a unit; trusts created for estate-planning purposes are permitted.
- A unit cannot be leased until the owner has owned it **and** personally, permanently lived in it for three (3) years.

HOW TO OBTAIN BOARD APPROVAL

Written approval of the Board of Directors is required to sell or transfer a lot or any interest in a lot. To obtain approval:

1. Give the Association written notice of the intended sale.
2. Provide the name and address of all proposed permanent occupants.
3. Submit a fully executed copy of the proposed sales contract, with all addenda and exhibits.
4. Submit a completed application for sale and purchase.
5. Include the screening fee shown on the cover page of this packet.
6. The purchaser and all proposed permanent occupants attend a personal interview with the Board or its Screening Committee.
7. The purchaser and all proposed permanent occupants consent to a complete background investigation, including but not limited to:

   Criminal history • Credit history • Prior residential history • Public records history • Civil litigation history
8. A permanent occupant who will not be named on the deed is not required to submit to a credit check unless guaranteeing the financial obligations for the unit or the buyer.

Release. The Board of Directors of East Lakes Homeowners Association shall be held harmless for any action or claim in connection with the use of the information contained in the attached application in the investigations conducted by the Board of Directors.

No move-in before approval. If a buyer or occupant moves in without the Association's prior written approval, the application is automatically withdrawn and the owner and occupants are responsible for the Association's legal costs.

This form gives the Association the names and emergency information of everyone residing in the unit, as required by Article II-A, Paragraphs 1 and 21, of the Covenants and Restrictions.

RESIDENCE AND PRIMARY RESIDENT

Address: _____ Unit #: _____

Date: _____

Owner ☐ Renter ☐

Name: _____

Signature: _____

Home Phone #: _____ Work Phone #: _____

Cell Phone #: _____ E-Mail: _____

Driver's License #: _____ Vehicle Tag #: _____

EMERGENCY CONTACT

Name: _____

Phone #: _____ Relationship: _____

RESIDENTS UNDER 18 YEARS OF AGE

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

ADDITIONAL ADULT OCCUPANTS

Occupant 1

Print Name: _____ Relationship: _____ Phone #: _____

Signature: _____ Driver's Lic. #: _____ Tag #: _____

Occupant 2

Print Name: _____ Relationship: _____ Phone #: _____

Signature: _____ Driver's Lic. #: _____ Tag #: _____

Occupant 3

Print Name: _____ Relationship: _____ Phone #: _____

Signature: _____ Driver's Lic. #: _____ Tag #: _____

READ FIRST: Complete all questions and fill in all blanks. All information supplied is subject to verification. If any question is not answered/left blank, or answered falsely, this application may be returned, not processed, and/or not approved. Missing information will cause delays. Once submitted, order can be cancelled but your fee will not be refunded. Rev. 06/2014

** THIS APPLICATION IS FOR A SINGLE PERSON OR A MARRIED COUPLE ONLY! **

APPLICATION FOR OCCUPANCY

Association Name: East Lakes in Pembroke Pines HOA

Circle one: Purchase - Lease - Occupant - Unit.# _____ Bldg.# ____ Address applied for:_____

Full Name _____ Date of Birth _____ Social Security # _____

Circle One: Single - Married - Separated - Divorced - How Long? _____ Other legal or maiden name _____

Have you ever been convicted of a crime? _____ Date (s) _____ County/State Convicted in _____

Charge (s) _____

Applicant's Cell Number(s) _____ Applicant's Email Address _____

Spouse _____ Date of Birth _____ Social Security # _____

Other legal or maiden name _____ Have you ever been convicted of a crime? _____ Date (s) _____

County/State Convicted in _____Charge (s) _____

Spouse's Cell Number(s) _____ Spouse's Email Address _____

No. of people who will occupy unit – Adults (over age 18) _____ Description of Pets _____

Names and ages of others who will occupy unit _____

In case of emergency notify _____ Address _____ Phone _____

PART I – RESIDENCE HISTORY

A. Present address _____ Phone _____
(Include unit/apt number, city, state and zip code)

Apt. or Condo Name _____ Phone _____ Dates of Residency: From _____ to _____

Circle one: Own Home - Parent/Family Member - Rented Home - Rented Apt - Other _____ Rent/Mtg Amount _____

Are you on the Lease? _____ If not, who is the leaseholder? _____ Are you on the Deed? ____If yes, under what name? _____

Name of Landlord_____ Phone _____ Email address _____

Circle one: Is your Landlord the: Owner of the property - Realtor - Family Member - Roommate - Property Manager - Other _____

B. Previous address _____
(Include unit/apt number, city, state and zip code)

Apt. or Condo Name _____ Phone _____ Dates of Residency: From _____ to _____

Circle one: Own Home - Parent/Family Member - Rented Home - Rented Apt - Other _____ Rent/Mtg Amount _____

Were you on the Lease? _____ If not, who is the leaseholder? _____ Were you on the Deed? ____If yes, under what name? _____

Name of Landlord_____ Phone _____ Email address _____

Circle one: Is your Landlord the: Owner of the property - Realtor - Family Member - Roommate - Property Manager - Other _____

C. Previous address _____
(Include unit/apt number, city, state and zip code)

Apt. or Condo Name _____ Phone _____ Dates of Residency: From _____ to _____

Circle one: Own Home - Parent/Family Member - Rented Home - Rented Apt - Other _____ Rent/Mtg Amount _____

Were you on the Lease? _____ If not, who is the leaseholder? _____ Were you on the Deed? ____If yes, under what name? _____

Name of Landlord_____ Phone _____ Email address _____

Circle one: Is your Landlord the: Owner of the property - Realtor - Family Member - Roommate - Property Manager - Other _____

PART II – EMPLOYMENT REFERENCES

Include a recent copy of an earnings statement to expedite processing

A. Employed by _____ Phone _____

Dates of Employment: From: _____ To: _____ Position _____ Fax_____

Monthly Gross Income_____Address _____

B. Spouse Employed by__ _____ Phone _____

Dates of Employment: From: _____ To: _____ Position _____ Fax_____

Monthly Gross Income_____Address _____

PART III – BANK REFERENCES

Include a recent copy of a bank statement to expedite processing

A. Bank Name _____ Checking Acct. #_____ Phone _____

Address _____ Fax _____

B. Bank Name _____Savings Acct. #_____ Phone _____

Address _____ Fax _____

PART IV – CHARACTER REFERENCES (No Family Members)

1. Name _____ Home Phone _____

Address _____ Business Phone _____

Email Address_____ Cellular Phone _____

2. Name _____ Home Phone _____

Address _____ Business Phone _____

Email Address_____ Cellular Phone _____

3. Name _____ Home Phone _____

Address _____ Business Phone _____

Email Address_____ Cellular Phone _____

4. Name _____ Home Phone _____

Address _____ Business Phone _____

Email Address_____ Cellular Phone _____

Are you using a realtor? Yes_____ No _____ If yes: Realtor's name_____

Email Address_____ Cellular Phone _____

Driver's License Number (Primary Applicant). _____ State Issued _____

Driver's License Number (Secondary Applicant) _____State Issued _____

Make _____ Type _____ Year _____ License Plate No. _____

Make _____ Type _____ Year _____ License Plate No. _____

If this application is not legible or is not completely and accurately filled out, Associated Credit (and the Association) will not be liable or responsible for any inaccurate information in the investigation and related report (to the Association) caused by such omissions or illegibility.

By signing the applicant recognizes that the Association and Associated Credit will investigate the information supplied by the applicant, and a full disclosure of pertinent facts will be made to the Association. The investigation may be made of the applicant's character, general reputation, personal characteristics, credit standing, police arrest record and mode of living as applicable. This form is for the exclusive use of Associated Credit Reporting, Inc.

Applicant's Signature _____ Date _____ Spouse's Signature _____ Date _____

ASSOCIATED CREDIT REPORTING, INC. *Established* 1985

4690 NW 103rd Avenue, Sunrise, Florida 33351
www.associatedcreditreporting.com

AUTHORIZATION FORM

I/We hereby authorize **Associated Credit Reporting, Inc.** to obtain data to verify any and all information they request with regards to my/our Application for Occupancy, specifically the verification of my bank account(s), credit history, residential history, criminal record history, employment verification and character references.

I/We hereby waive any privileges I/we may have with respect to the said information in reference to its release to the aforesaid party. Information obtained for this report is to be released to the authorized party designated on the Application for Occupancy, for their exclusive use only. PLEASE INCLUDE COPY OF DRIVER'S LICENSE TO CONFIRM IDENTITY. If you do not have a driver's license, please include a copy of your Passport or current government issued identification card.

I/We acknowledge our rights as stated in the Fair Credit Report Act that I/we are entitled to a copy of the report upon proper written request and can dispute any inaccurate information for re-verification. I/We understand that Associated Credit Reporting, Inc. is not directly involved in the approval or denial of any applicant. The information received by Associated Credit Reporting, Inc. shall be held in strict confidence, protected as governed under the Fair Credit Reporting Act, and will never be released to any third party other than the designated recipient. I/We further understand that this is a non-refundable process.

By signing below, I/We further state the Application for Occupancy and Authorization Form were signed by me/us and was not originated with fraudulent intent by me/us or any other person and that the signature(s) below are my/our own proper legal signature. I/We certify (or declare) under penalty of perjury that I/We agree to the foregoing and; that all answers and information contained on the Application for Occupancy are true and correct and will hold Associated Credit Reporting, Inc. harmless from the result of the investigation.

_____	_____
(Applicant's Signature)	(Spouse's Signature)
_____	_____
(Applicant's Name Printed)	(Spouse's Name Printed)
_____	_____
(Date Signed)	(Date Signed)