THE LONGWOOD CONDOMINIUM ASSOCIATION, INC.

11811 Ave. of the P.G.A., Palm Beach Gardens, Florida 33418
Office: 561-622-7331 Fax: 561-360-3137
lw181 l @gmail.com

Enclosed please find:

Application for Occupancy
Age Verification Registration form
Background Inquiry Release form
Notice of Vote to Forego Fire Sprinkler Retrofitting

Please return the following to the Longwood Condominium Association:

1. Application for Occupancy
2. Age Verification Registration form with Copy of Proof of Age
3. Background Inquiry Release form
4. Copy of the Signed Lease
5. Check in the amount of $75. This is a non-refundable screening fee.

Upon receipt of these documents, an appointment with the screening committee can be set up.

Please note in the formal application paragraph #5 that the Board has thirty (30) days from receipt of application to reply to your request. Over a period of time it has been found by the Board that certain requests made by prospective purchasers need to have lengthy discussions as to the legal aspect which may involve consideration with the ASSOCIATION's Documents, and Rules and Regulations . Therefore, the Board wishes to emphasize the thirty-day restriction as mentioned. In most cases a reply can be made within a shorter period of time.

Annual Renters are required to pay a mandatory , non-refundable move-in fee of $200.00. if renting a unit. This fee is to help defray costs of repairing damages that movers, repairmen and others do to our buildings, floors, walls, elevators etc.

APPLICATION FOR OCCUPANCY

PLEASE PRINT CLEARLY Building # _____ Unit # _____ Today's Date_____

Desired Date of Occupancy _ _ _ _ _ _ _ Purchase D Lease D How Long?_____

Name _____ Other Legal or Maiden Name_____

Sin gle D Married D Separated D Divorced D How Long?_____

Date of Birth _____ Social Security # _____

E-Mail_____Phone_____

Name of Spouse, former Spouse or Other _____

Date of Birth_____ Social Security#_____

Number of People Who Will Occupy Unit_____Adults Over Age 18_____Children Thru Age 18_____

Names and Ages of Children Who Will Occupy _____

Description ofPe ts -

Name , Address, & Phone of Emerge nc y Contact_____

_____

PART I-RESIDENCE HISTORY

Please print - Include unit/apt numb er, city, state and zip code

A. Present Address _____ Phone_____

Apt or Condo Name _____ How Long? _____

Landlord or Mortgagee_____ Phone_____

Address _____ Mtg # _____

B. Previous Address _____ How Long? _____

Apt or Condo Name _____ Phone_____

Landlord or Mort gagee_____ Phone_____

Address _____ Mtg # _____

C. Previous Address _____ How Long? _____

Apt or Condo Name _____ Phone_____

Landlord or Mortgagee _____ Phone_____

Address _____ Mtg # _____

PART II - EMPLOYMENT REFERENCES

A. Employed by_____ Phone_____

Address _____ Fax_____

How Long _____ Position_____ Approx. Monthly Income_____

B. Spouse Employed by_____ Phone_____

Address _____ Fax_____

How Long _____ Position _____ Approx. Monthly Income_____

PART III - BANK REFERENCES

A. Bank Reference _____ Phone _____

Address _____ Fax _____

How Long Account # Checking D Savings D

B. Bank Reference _____ Phone _____

Address _____ Fax _____

How Long Account # Checking D Savings D

PART IV-CHARACTER REFERENCES

A. Name _____ Phone _____

Address _____ Cell _____

E-mail _____

B. Name _____ Phone _____

Address _____ Cell _____ E-mail _____

C. Name _____ Phone _____

Address _____ Cell _____

E-mail _____

Number of Cars _ _ _ Driver's License # _ _ _ _ _ _ _ _ _ _ _ State _____

Make _____ Year _____ License _____

Make _____ Year _____ License _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _

Parking Space # _ _ _ _ _ _ _ _ _

By signing, the applicant recognizes that the Association or agent may investigate the information supplied by the applicant and a full disclosure of pertinent facts may be made to the Association.

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

Date _ _ _ _ _ _ _

Spouse /Other's Signature _ _ _ _ _ _ _ _ _ _ _ _ _ _ _

Date _____

ANY FRAUDULENT STATEMENT MADE ABOVE WILL BE GROUNDS FOR LEGAL ACTION AT THE EXPENS E OF THE PURCHASER(S)

AGE VERIFICATION REGISTRATION FORM

To: The Board of Directors
Longwood Condominium Association, Inc.

Re: Building Number: ___ Unit Number: _ _ _ _

Instructions:
The following information is requested of all Unit Owners and (if different) Permanent Occupants residing in the above referenced Building/Unit. This Registration Form is requested and required as we are an adult commu n ity. As soon as possible , please return the completed and signed form along with a photocopy of any one of the following documents as proof of age:

- Photo driver's lice nse
- Passport (page 1)
- Birth Certificate
- Baptismal Certificate showing date of birth or age.

Your cooperation is appreciated. Please call should you have any questions.

Names of all Unit Owners (as per the Deed or other Instrument of Title)	**Age**	**Document Enclosed**

Names of all occupants (including owners, tenants, family members and other permanent occupants)	**Age**	**Document Enclosed**

Dated this _____day of _____,20___ _

(All persons listed above sign here)

_ _

_____

_____

_____

Enclosures: Photocopies of the documents referenced for each Unit Owner and Occupant

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BACKGROUND INQUIRY RELEASE

I **understand the following:** That Federal Background Services will conduct a criminal background and driver's license inquiry on me on behalf of The Longwood Condominium Association, Inc. This background investigation ***may*** include inquiries from the FBI, Florida Department of Law Enforcement, and the Department of Motor Vehicles as deemed necessary.

Therefore, I authorize, without hesitation or reservations, to release or furnish any of the afore-mentioned information.

Please Print

_____

First Name Middle Initial Last Name

_____ _____

Social Security Number Date of Birth

_____ _____

Driver's License Number State

Signature _____ Date: _____

THE LONGWOOD CONDOMINIUM ASSOCIATION, INC.

WRITTEN NOTICE OF
VOTE TO FOREGO FIRE SPRINKLER SYSTEM RETROFITTING

This Notice is being sent to each owner of a unit in The Longwood Condominium Association, Inc., to notify each owner that the Association has received the affirmative vote of a majority of all voting interests in the Association to forego retrofitting of the common elements, association property, or units of the Condominium with a fire sprinkler system, as allowed by Section 718.112(2)(1), Florida Statutes, as amended.

A copy of this Notice must be provided by you to any new owner prior to closing and furnished to any tenant or lessee, prior to entering into a rental agreement.

Dated: 9/13/16

BY ORDER OF THE BOARD OF DIRECTORS

BY: James Blom