

TRAK PROPERTY MANAGEMENT
751 Park of Commerce Drive Suite 116
Boca Raton, FL 33487
561-245-4444 OFFICE 561-245-4447 FAX

**IF YOU REQUIRE A CLOSING LESS THAN 14 DAYS
FROM SUBMISSION OF APPLICATION,
YOU MUST SUBMIT A COMPLETE APPLICATION
AND ADD A SEPARATE RUSH FEE
PAYABLE TO TRAK
IN THE AMOUNT OF \$100.00
IN ADDITION TO THE APPLICATION FEES.**

**PLEASE REVIEW THE CHECKLIST CAREFULLY PRIOR
TO SUBMISSION.**

APPLICATIONS WILL BE PROCESSED

**MONDAY – FRIDAY
FROM
9:00 AM – 12:00 PM**

IN THE ORDER THEY ARE RECEIVED

WARNING: We are not authorized to change an owner's name in our system until we have received a Warranty Deed or copy of change from the Palm Beach Property Appraiser's website. If you do not provide this proof of change of ownership your bills will go to the previous owner and you may incur late fees, interest, and attorney fees

**HIGHLAND GROVE ESTATES HOMEOWNERS ASSOC.,
INC.
APPLICATION FOR SALE/LEASE APPROVAL**

1. THIS APPLICATION MUST BE COMPLETED IN DETAIL BY THE PROPOSED BUYER OR LESSEE AND RETURNED TO:

**C/O TRAK PROPERTY MANAGEMENT
751 Park of Commerce Drive Suite 116
Boca Raton, FL 33487
561-245-4444 OFFICE 561-245-4447 FAX**
2. PLEASE ATTACH A COPY OF THE SALES CONTRACT OR LEASE AGREEMENT.
3. PLEASE ATTACH A COPY OF DRIVERS LICENSE FOR ALL APPLICANTS.
4. PLEASE ATTACH THE FOLLOWING CHECKS:
 - I. A NON-REFUNDABLE APPLICATION FEE OF \$100.00 PER APPLICANT (A MARRIED COUPLE IS ONE APPLICANT) PAYABLE TO HIGHLAND GROVE ESTATES.
 - II. A NON-REFUNDABLE PROCESSING FEE IN THE AMOUNT OF \$50.00 PAYABLE TO TRAK PROPERTY MANAGEMENT.
5. LEASES CANNOT BE FOR LESS THAN SIX MONTHS.
6. AN INTERVIEW BY A REPRESENTATIVE OF THE ASSOCIATION IS REQUIRED.
7. THERE IS AN OCCUPANCY RESTRICTION OF NOT MORE THAN TWO PERSONS PER BEDROOM. (i.e. two bedroom house – 4 persons)
8. OWNERS MUST PROVIDE NEW BUYERS WITH A COPY OF THE DOCUMENTS FOR HIGHLAND GROVE ESTATES AND SIGNED PROOF OF THIS IS ATTACHED & MUST BE SIGNED.
9. OWNER AND TENANT MUST SIGN AND BE AWARE OF THE ASSIGNMENT OF RENT.
10. THIS COMPLETED APPLICATION MUST BE SUBMITTED TO THE ASSOCIATION OFFICE NO LATER THAN 30 DAYS PRIOR TO THE DESIRED DATE OF CLOSING OR MOVE IN.
11. OWNERS MUST SUPPLY RENTERS WITH COPY OF RULES AND REGULATIONS. HOMEOWNER ACKNOWLEDGES RESPONSIBILITY FOR COMPLIANCE BY TENANT OF EXISTING BY-LAWS, RULES & REGULATIONS, DECLARATIONS AND RESTRICTIONS. BOTH RENTERS AND OWNERS MUST BE AWARE THAT FAILURE TO ABIDE BY RULES/REGULATIONS OF HIGHLAND GROVE ESTATES OR CONTINUOUS VIOLATIONS (NON COMPLIANCE BY TENANTS) MAY RESULT IN TERMINATION OF THE LEASE BY THE BOARD OF DIRECTORS.

**APPLICATION FOR LEASE/SALE, GIFT, DEVISE OR
INHERITANCE APPROVAL**

PLEASE PRINT OR TYPE

TODAY'S DATE: _____

IS THIS A SALE OR LEASE: _____

CLOSING DATE: _____ LEASE TERM: _____

PRESENT OWNER'S NAME: _____

TELEPHONE: _____

ADDRESS OF UNIT FOR SALE OR LEASE:

NAME OF REALTOR HANDLING SALE OR LEASE: _____

TELEPHONE: _____

BUYER'S NAME: _____

LESSEE'S NAME: _____

PRESENT ADDRESS: _____

TELEPHONE: _____

EMAIL ADDRESS: _____

OTHER PERSONS WHO WILL OCCUPY THE UNIT WITH YOU:

NAME	AGE	RELATIONSHIP
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

1. I hereby agree for myself and on behalf of all persons who may use the home which I seek to purchase or lease:
 - a. I will abide by all the restrictions contained in the By-Laws, Rules and Regulations and Restrictions, which are or may in the future be imposed by HIGHLAND GROVE ESTATES HOA.
 - b. I understand that pets (if any) must be kept on a leash and solid waste must be removed.
 - c. I understand that sub-leasing or occupancy of this unit in my absence is prohibited.
 - d. I understand that any violation of the terms, provisions, conditions and covenants of the HIGHLAND GROVE ESTATES HOA Documents provides cause for immediate action as therein provided, or termination of the leasehold under appropriate circumstances.

2. I understand that the acceptance for Lease of a unit at HIGHLAND GROVE ESTATES HOA is conditioned upon the truth and accuracy of this application and upon the approval of the Board of Directors. Any misrepresentation or falsification of information of these forms will result in the automatic rejection of this application. Occupancy prior to approval is prohibited.

3. I understand that the Board of Directors of HIGHLAND GROVE ESTATES HOA may cause to be instituted such an investigation of my background as the Board may deem necessary. Accordingly, I specifically authorize the Board of Directors to make such investigation and agree that the information contained in this and the attached application may be used in such investigation and that the Board of Directors and Officers of HIGHLAND GROVE ESTATES HOA itself shall be held harmless from any action or claim by me in connection with the use of the information contained herein or any investigation conducted by the Board of Directors.

In making the foregoing application, I am aware that the decision of HIGHLAND GROVE ESTATES HOA will be final and no reason will be given for any action taken by the Board. I agree to be governed by the determination of the Board of Directors.

 APPLICANT'S Signature CO-APPLICANT'S Signature

 Print Applicant's Name

 Print Co-Applicant's Name

APPLICATION FOR OCCUPANCY

PRESENT OWNER'S NAME: _____

TELEPHONE: _____

ADDRESS OF UNIT FOR SALE OR LEASE:

NAME OF REALTOR HANDLING SALE OR LEASE: _____

TELEPHONE: _____

BUYER'S/LESSEE'S NAME: _____

TELEPHONE: _____ MARITAL STATUS: _____

DATE OF BIRTH: _____ SOCIAL SECURITY #: _____

DRIVER'S LICENSE #: _____ EXPIRATION DATE: _____

SPOUSE/CO-APPLICANT: _____

TELEPHONE: _____ MARITAL STATUS: _____

DATE OF BIRTH: _____ SOCIAL SECURITY #: _____

DRIVER'S LICENSE #: _____ EXPIRATION DATE: _____

NUMBER OF ADULT OCCUPANTS: _____ NUMBER OF CHILDREN: _____

IN CASE OF EMERGENCY NOTIFY: _____

ADDRESS: _____

TELEPHONE: _____

PET REGISTRATION FORM

NAME: _____
ADDRESS IN HIGHLAND GROVE: _____

I HAVE THE FOLLOWING PETS:

Number of Dogs: _____

Number of Cats: _____

1. Breed _____ Weight _____
Pets Name _____

2. Breed _____ Weight _____
Pets Name _____

3. Breed _____ Weight _____
Pets Name _____

Signature of Applicant: _____

If you do not have any pets, please sign here:

A photo of each pet must be included with this application.

RESIDENCY (SECTION 1)

PRESENT ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

LANDLORD/MORTGAGE COMPANY: _____

MORTGAGE LOAN #: _____

EMPLOYMENT (SECTION 2)

PRESENT EMPLOYER: _____

TELEPHONE: _____

TITLE: _____ LENGTH OF EMPLOYMENT: _____

SALARY: _____

SPOUSE'S/CO-APPLICANT'S EMPLOYER: _____

TELEPHONE: _____

TITLE: _____ LENGTH OF EMPLOYMENT: _____

SALARY: _____

BANK INFORMATION (SECTION 3)

BANK NAME: _____ TELEPHONE: _____

ADDRESS: _____

CHECKING ACCOUNT #: _____ DATE ACCOUNT OPENED: _____

SAVINGS ACCOUNT #: _____ DATE ACCOUNT OPENED: _____

BANK NAME: _____ TELEPHONE: _____

ADDRESS: _____

CHECKING ACCOUNT #: _____ DATE ACCOUNT OPENED: _____

SAVINGS ACCOUNT #: _____ DATE ACCOUNT OPENED: _____

CHARACTER REFERENCES (SECTION 4)

(Do not give relatives' names)

NAME: _____ RELATIONSHIP: _____

TELEPHONE: _____ TELEPHONE: _____

NAME: _____ RELATIONSHIP: _____

TELEPHONE: _____ TELEPHONE: _____

AUTOMOBILE INFORMATION (SECTION 5)

NUMBER OF CARS: _____

MAKE: _____ MODEL: _____ YEAR: _____

TAG #: _____ DRIVERS LICENSE # _____

MAKE: _____ MODEL: _____ YEAR: _____

TAG #: _____ DRIVERS LICENSE # _____

MAKE: _____ MODEL: _____ YEAR: _____

TAG #: _____ DRIVERS LICENSE # _____

GENERAL INFORMATION (SECTION 6)

Have you ever been evicted before? _____

If yes, where/why? _____

Have you ever refused to pay rent? _____

If yes, where/why? _____

CHECKLIST

1. If any question is left blank, this application may not be approved. This application is subject to approval.
2. Attached is a non-refundable application fee of \$100.00 payable to HIGHLAND GROVE ESTATES HOA.
3. Attached is a non-refundable processing fee of \$50.00 payable to TRAK.
4. Please enclose a copy of the Lease/Sales Contract with this application.
5. Proof of receipt of documents on sales.
6. Proof of receipt of rules for leases.
8. Copies of registrations for all vehicles listed on application.

I/We declare the above information to be true and correct. I/We authorize the landlord, or agent(s) to verify and obtain a consumer credit report.

I/We agree to abide by the Rules and Regulations of the Association.

APPLICANT'S Signature/Date

CO-APPLICANT'S Signature/Date

Print Applicant's Name

Print Co-Applicant's Name

**PROOF OF RECEIPT OF DOCUMENTS
FOR SALES**

**Please sign below as proof that you received the documents for HIGHLAND GROVE
ESTATES HOA.**



I/We have received the Documents for HIGHLAND GROVE ESTATES HOA

Signature Date

Signature Date

**PROOF OF RECEIPT OF RULES & REGULATIONS FOR
LEASES**

**Please sign below as proof that you received the rules and regulations for HIGHLAND
GROVE ESTATES HOA.**



I/We have received the Rules & regulations for HIGHLAND GROVE ESTATES HOA

Signature

Date

Signature

Date

**EFFECTIVE JULY 1, 2010; FLORIDA STATUTE 718.116 (CONDO)
720.3085 HOA:**

**UNIT OWNERS' CONSENT TO ASSIGNMENTS OF RENTS TO THE
ASSOCIATION.**

The undersigned, _____, as owner(s) of the property whose address is: _____ of _____, and whose mailing address is _____ and the undersigned tenant (s) _____ agree as follows;

1. That said owner agrees to continue making payments directly to the Association all dues/assessments and/or special assessments as they are due.
2. That in the event that said owner does not pay any one (1) monthly assessment by the 30th day of each month, The Association, or any agent thereof, shall have the right to require that the tenant pay the monthly assessment along with any additional amounts then owed to the Association, including but not limited to, delinquent assessments, special assessments, late fees, attorney's fees, costs from enforcement of this Addendum or other legal action to collect delinquent maintenance/assessments, and fines directly to The Association and to then pay the remainder to the landlord/owner.
3. The Association shall send written notice to both the unit owner and the tenant of the imposition of the requirement, after an owner has failed to pay any one (1) month's dues/assessments by the 30th day of the month.
4. The unit owner hereby assigns that portion of the rents, including any delinquent assessments, special assessments, attorney's fees and court costs, due and payable to the Association, upon the association giving notice as described above of the delinquency and imposition of the requirement that the tenant pay the monthly assessment to the Association.
5. The unit owner agrees that he/she/they will not consider the tenant delinquent in their rental payment, nor commence eviction proceedings against the tenant, in the event that the tenant pays the monthly assessment directly to the Association and deducts same from the tenant's rental payment to the unit owner.
6. After the account balance becomes current by means of tenants payments, the tenant shall continue to deduct the monthly assessments/dues from the rent and pay it directly to the Association unless otherwise notified by The Association or an Agent of the association.

7. In the event it becomes necessary to bring legal action to enforce this agreement, the prevailing party shall be entitled to recover reasonable

attorney's fees, costs and interest. Any fees or costs incurred by the Association shall be incurred in the amount paid by the tenant to the Association under this addendum.

THIS AGREEMENT SHALL BIND ALL PARTIES THERETO

Countersigned: _____ or Management

Unit Owner: _____

By: _____

Tenant: _____

Title: _____