

PARLIAMENT TOWERS CONDOMINIUM, INC.
405 North Ocean Blvd.
Pompano Beach, Florida 33062

APPLICATION FOR OWNERS

1. THIS APPLICATION, AND ATTACHED APPLICATION FOR OCCUPANCY AND AUTHORIZATION FORMS, INCLUDING CONSENT FORM FOR BACKGROUND CHECK FOR EACH PERSON ON THE DEED, MUST BE COMPLETED IN DETAIL BY THE PROPOSED OWNER(S). THESE FORMS, WHEN COMPLETED, MUST BE SUBMITTED TO THE ASSOCIATION OFFICE AT LEAST 30 DAYS PRIOR TO THE DATE OF OCCUPANCY.
2. COPY OF THE CONTRACT OF SALE MUST BE SUBMITTED WITH THIS APPLICATION.
3. OCCUPANCY PRIOR TO BOARD APPROVAL IS PROHIBITED.
4. OWNERS MUST BE INTERVIEWED BEFORE BOARD MEMBERS TO BE APPROVED.
5. NO PETS ALLOWED AT ANY TIME.
6. HOURS FOR MOVING IN OR OUT OF THE BUILDING ARE 8:00 A.M. UNTIL 4:00 P.M. WEEKDAYS. LIMITED MOVING SATURDAY MORNING WITH BOARD APPROVAL. NO MOVING IN OR OUT OF THE BUILDING AT ANYTIME ON SUNDAYS OR HOLIDAYS.
7. MONTHLY MAINTENANCE PAYMENTS ARE DUE THE FIRST OF EVERY MONTH. PAYMENTS RECEIVED AFTER THE 5TH ARE SUBJECT TO \$25 LATE CHARGE.
8. THE CONDOMINIUM UNIT SHALL BE OCCUPIED AND USED ONLY AS A PRIVATE DWELLING BY THE APPLICANT AND MEMBERS OF HIS FAMILY AND SOCIAL GUESTS AND FOR NO OTHER PURPOSE.
9. NO OWNER MAY LEASE HIS APARTMENT FOR THE FIRST ^{3 years} OWNERSHIP. AFTER THE FIRST YEAR, APARTMENTS MUST BE LEASED FOR 12 MONTH PERIODS ONLY.
10. APARTMENTS MUST BE OWNED BY INDIVIDUALS, NOT CORPORATIONS.
11. THE OWNER MUST HAVE A COPY OF THE CONDOMINIUM RULES AND REGULATIONS.
12. THE ASSOCIATION MUST HAVE KEYS TO APARTMENT FOR PEST CONTROL AND EMERGENCY ACCESS.
13. NO COMMERCIAL VEHICLES, BOATS, TRAILERS, MOTOR HOMES, ETC., ARE PERMITTED ON THE CONDOMINIUM PREMISES.
14. THE NUMBER OF RESIDENTS OR LESSEES LIVING IN ANY APARTMENT MAY NOT EXCEED THE FOLLOWING:
 - TWO BEDROOM – NOT MORE THAN FOUR PERSONS
 - ONE BEDROOM – NOT MORE THAN THREE PERSONS
 - EFFICIENCY – NOT MORE THAN TWO PERSONS
15. NOTIFICATION CARDS WITH EMERGENCY CONTACT PERSON'S ADDRESS, TELEPHONE NUMBERS AND EMAIL ADDRESS SHOULD BE FILLED OUT AND LEFT AT THE OFFICE.
16. PLEASE ATTACH A NON-REFUNDABLE PROCESSING FEE OF \$100.00 TO THIS APPLICATION MADE PAYABLE TO THE ASSOCIATION. ACCEPTANCE OF THESE FEES DOES NOT IN ANY WAY CONSTITUTE APPROVAL OF THIS TRANSACTION.
17. THERE IS ONE PARKING SPOT ASSIGNED TO EACH UNIT. RESIDENTS MUST PARK IN THEIR ASSIGNED SPOTS. ONLY. IF ADDITIONAL SPACE IS REQUIRED, IT MUST BE RENTED FROM ANOTHER OWNER.

PLEASE PRINT OR TYPE ALL INFORMATION ON THESE FORMS

DATE _____ APT. NO. _____ APPROX. CLOSING DATE _____

CURRENT OWNER'S NAME _____

PHONE NO. _____ EMAIL _____

NAME OF REALTOR _____ PHONE NO. _____

NAME OF PROPOSED PURCHASER(S) (as Title will appear):

a. _____ b. _____

PEOPLE WHO WILL OCCUPY THE APARTMENT WITH YOU:

<u>NAME</u>	<u>AGE</u>	<u>RELATIONSHIP</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

APPLICATION FOR OCCUPANCY/APPROVAL

Name _____ Date of Birth _____ SS# _____

Spouse _____ Date of Birth _____ SS# _____

Current Address _____

Number of people who will occupy: Adults _____ Children _____

In Case of Emergency Notify: _____

CONTACT INFORMATION

Telephone Number Name _____ Number _____
Cell _____

Telephone Number Name _____ Number _____
Cell _____

Email: _____ Other _____

RESIDENCE HISTORY

Present Address _____ Phone _____

Name of Apt/Condo _____

Phone _____ Dates of Residency _____

Name of Landlord or Mortgage Co. _____ Phone _____

Address _____ Mtg. No. _____

Previous Address _____ Your Apt. # _____

Name of Apt/Condo _____

Phone _____ Dates of Residency _____

Name of Landlord or Mortgage Co. _____ Phone _____

Address _____ Mtg. No. _____

EMPLOYMENT REFERENCES

Employed by _____ Phone # _____

Length of Service _____ Position _____

Address _____ Monthly Income _____

Spouse's Employment _____ Phone # _____

Length of Service _____ Position _____

Address _____ Monthly Income _____

HAVE YOU EVER RESIDED IN FLORIDA BEFORE? _____

<u>DATES</u>	<u>NAME OF CONDO/APT/ HOTEL</u>	<u>CITY</u>
_____	_____	_____
_____	_____	_____

1. In making the foregoing application I represent to the Board of Directors that the purpose of the purchase of an apartment at PARLIAMENT HOUSE is as follows:

Permanent Residence _____ Seasonal Residence _____ Other _____

2. I hereby agree for myself and on behalf of all persons who may use the apartment which I seek to purchase that I will abide by all of the restrictions contained in the By-Laws, Rules and Regulations, Condominium Documents and restrictions which are or may in the future be imposed by the PARLIAMENT TOWERS CONDOMINIUM, INC.
3. I have received a copy of all Condominium Documents: Yes _____ No _____
I have received a copy of the Rules and Regulations: Yes _____ No _____
4. I understand that there is a restriction on pets and that I may not bring a pet, nor may any guest, visitor or tenant bring a pet, nor acquire one, either temporarily or permanently, after occupancy.
5. I understand that the acceptance for purchase of an apartment at PARLIAMENT HOUSE is conditioned upon the truth and accuracy of this application and upon the approval of the Board of Directors. Occupancy prior to the Board of Directors' approval is prohibited.
6. I understand that the Board of Directors of PARLIAMENT HOUSE ASSOCIATION may cause to be instituted 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 PARLIAMENT TOWERS CONDOMINIUM ASSOCIATION 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 the PARLIAMENT TOWERS CONDOMINIUM, INC. ASSOCIATION will be final and no reason will be given for any action taken by the Board of Directors. I agree to be governed by the determination of the Board of Directors.

APPLICANT _____ APPLICANT _____
Signature Signature

BROWN'S BACKGROUND CHECKS
CONSENT TO OBTAIN CONSUMER REPORT ON SUBSCRIBER
Parliament Towers Condominium Inc.

I understand that you may obtain consumer reports that relate to my credit and/or criminal history. This information will, in whole or in part, be obtained from AISS, a Sterling Infosystems Company, 6111 Oak Tree Blvd, 4th floor, Independence, OH 44131, telephone 800.853.3228. I understand that you may be requesting information from various federal, state and other agencies or institutions, which maintain public and non-public records concerning my past activities relating to my credit and/or criminal history. This information will be reviewed by the Association and may be reviewed by a unit owner if it's a rental.

I authorize, without reservation, any party, institution, or agency contacted by AISS to furnish the above mentioned information:

_____/_____/_____
Applicant Name Date of Birth* Social Security Number
*Date of Birth is requested in order to obtain accurate retrieval of records.

_____/_____/_____
Co-Applicants Name Date of Birth Social Security Number

Alias/Previous Name(s)

Current Physical Address City & State Zip code

☐ **California, Minnesota & Oklahoma Applicants Only:** Please check here to have a copy of your consumer report sent directly to you.

Notice to CALIFORNIA Applicants

Under Section 1786.22 of the California Civil Code, you have the right to request from AISS, upon proper identification, the nature and substance of all information in its files on you, including the sources of information, and the recipients of any reports on you, which AISS has previously furnished within the two-year period preceding your request. You may view the file maintained on you by AISS during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services. Upon making a written request, you may receive a summary of your report via telephone.

SIGNATURE _____ DATE _____

Co-Applicant
SIGNATURE _____ DATE _____