

Applegreen #4 Condominium

Please FAX, E-MAIL or MAIL ALL FORMS PRIOR TO INTERVIEW

The following forms must be submitted for an interview:

- _____A copy of the signed contract between the buyer and seller or the lease between the tenant and the owner
- _____A copy of your picture ID must be sent for the application process.
- _____A copy of the registration for your vehicle(s)
- _____A copy of your car insurance for your vehicle(s)
- _____Tenant Screening Authorization – Check payable to JSB Property Management of \$100.00 for each adult {occupants over the age of 18} that will be living in the home or on the deed. You may fax the above documents with a copy of your check but processing will not begin until we receive your check. Application fees are non-refundable.

The completed application(s) must be submitted to the Management Office at least **30 days** prior to the expected closing date or rental move in. No interviews will be scheduled without a completed application.

Purchaser:

- All applicants must make themselves available for a personal interview prior to the Board of Director's final decision. Occupancy prior to Board approval is **prohibited**.
- Seller must provide the purchaser with a copy of the Association's Documents and Rules and Regulations; otherwise you must purchase them from the Association.
- Purchaser must bring Rules and Regulations to the interview
- Purchasers must notify Management Company with the exact closing date.

Tenant:

- All applicants must make themselves available for a personal interview prior to the Board of Director's final decision. Occupancy prior to Board approval is **prohibited**.
- Tenant must bring Rules and Regulations to the interview
- Copy of the signed contract must be sent to Management with application

General Rules:

NO PETS

1 VEHICLE PER UNIT

Sincerely,
JSB Property Management, Inc.
Jamie Blum

Board Member's Signature

JSB Property Management

PO Box 50373

Lighthouse Point, FL 33074

954-366-1392 phone

954-570-8919 fax

jamie@jsbprop.com

To All Unit Owners,

We would like to update our records in the office for all residents that are living at your Condominium/Homeowner's Association for future mailers and general information sheets. Please fill out the requested information and either mail it to our office or drop it off at the office at any time.

We appreciate your cooperation!

Please Print

Name(s): _____

Unit Number _____ Home Phone: _____

Work Number: _____ Cell Phone: _____

Fax Number: _____ Email Address: _____

Emergency Contact: _____ Emergency Phone: _____

Vehicle Information:

Parking Spot/Driveway: _____

Make: _____ Color: _____ Year: _____

License Plate Number: _____

Second Home:

Address: _____

City State Zip code

Phone Number: _____