



Tarpon Highlands at Lake Tarpon Sail & Tennis Club I Condominium Association, Inc.

SALE AND RENTAL INSTRUCTIONS

To: Unit Owners and Realtors

We welcome your Real Estate Transactions under the following guidelines:

- 1) No 'For Sale' or 'For Rent' signs or other displays or advertising shall be posted on any part of the Common Elements, Limited Common Elements, or Condo Units.
- 2) Anyone wishing to purchase or rent any unit must first complete and submit an Application to the management company AT LEAST 15 DAYS PRIOR to desired closing or occupancy. The following information is needed to complete a transaction:
 - a) Fully Completed Application
 - b) Check for \$75 payable to Tarpon Highlands at Lake Tarpon Sail & Tennis Club I
 - c) Copy of Driver's Licenses
 - d) Copy of the Purchase or Lease Agreement
 - e) Personal Interview with a screening committee or Board Director prior to closing or occupancy

All information is to be mailed together to the management company. A personal interview will be scheduled following receipt. Incomplete information will delay the process.

- 3) Condominium documents including current Rules & Regulations must be supplied to a buyer from the current unit owner. If needed, a full set may be purchased from the management company for \$50.
- 4) Current unit owner must supply a buyer or renter with a pool key, clubhouse key, and post box keys. Replacement pool key may be purchased for \$10 and clubhouse key for \$50. Contact a locksmith for replacement postal box keys.
- 5) Rental Policy: Minimum lease allowed is 4 months.
- 6) Pet Policy: A maximum of two pets are allowed subject to board approval and observance of all pet rules.
- 7) Unit Owners are responsible for all actions of their tenants and guests. All Tenants must read and agree to abide by all association Rules & Regulations and other condominium documents.

The above information is summary in nature. For more details, please refer to the Condominium Documents.

If you should have any questions regarding a sale or rental, please contact:

**Ameri-Tech Community Management
24701 US Highway 19 N Ste. 102
Clearwater, FL 33763
(727) 726-8000**

Tarpon Highlands at Lake Tarpon Sail & Tennis Club I Condominium Association, Inc.

APPROVAL REQUEST FOR OWNERSHIP TRANSFER OR RENTAL

SPECIAL NOTE: This request for approval of ownership transfer or rental must be in the possession of the Board of Directors at least fifteen (15) days *prior* to closing/lease date. A copy of the sales or lease agreement and fee must accompany this request.

Unit # _____ Current Owner: _____ Phone: _____

Purchase _____ Lease _____ Lease Length: _____ Date of Closing / Occupancy: _____

Title Company: _____ Phone: _____ Fax: _____

Real Estate Agent: _____ Phone: _____ Cell: _____

Purchaser(s) / Tenant(s) represent that the following information is true and correct and hereby consents to the association's inquiry and investigation concerning this or any other information provided or deemed necessary for approval of this request. Applicant agrees that a background check may be obtained and any other verification of information regarding this application. Any material misstatements as to the lessees' or buyers' statements contained herein, may be grounds for denial.

1) LIST ALL OCCUPANTS (Maximum of 2 per bedroom allowed)

A) Name: _____ Phone: _____

Date of Birth: _____ SS#: _____ Driver's License #: _____

B) Name: _____ Phone: _____

Date of Birth: _____ SS#: _____ Driver's License #: _____

C) Name: _____

Date of Birth: _____ SS#: _____ Driver's License #: _____

D) Name: _____

Date of Birth: _____ SS#: _____ Driver's License #: _____

E) Name: _____

Date of Birth: _____ SS#: _____ Driver's License #: _____

F) Name: _____

Date of Birth: _____ SS#: _____ Driver's License #: _____

ATTACH SEPARATE SHEET IF NEEDED. PLEASE ATTACH COPY OF DRIVER'S LICENSES FOR ALL DRIVERS

2) LIST PETS (Attach the latest vaccine report for each pet)

A) Description: _____ Rabies Tag #: _____

B) Description: _____ Rabies Tag #: _____

3) LIST ALL AUTOMOBILES:

Make/Model/Year: _____ Color: _____ Tag #: _____
Make/Model/Year: _____ Color: _____ Tag #: _____
Make/Model/Year: _____ Color: _____ Tag #: _____
Make/Model/Year: _____ Color: _____ Tag #: _____

4) CRIMINAL HISTORY: Has any applicant ever been evicted, convicted of a crime or considered a sexual offender by any legal authority: No ___ Yes ___ If yes, Charges, When, Where: _____

5) RESIDENCE HISTORY

A) Present Address: _____ Owned or Rented: _____
City: _____ State: _____ Zip _____ Dates of Residency _____
Landlord or Mortgage Co: _____ Phone: _____
B) Previous Address: _____ Owned or Rented _____
City: _____ State: _____ Zip _____ Dates of Residency _____
Landlord or Mortgage Co: _____ Phone: _____

6) MAILING ADDRESS AFTER CLOSING: _____
_____ Alternate Phone: _____
Unit to be used as: Permanent Residence ___ Seasonal Residence ___ Rental Unit: ___

7) EMPLOYMENT, BANK, & CHARACTER REFERENCES

A) Employed by or Retired from: _____
Address: _____
Phone: _____ Years employed _____ Occupation/Position: _____
B) Spouse Employed by or Retired from: _____
Address: _____
Phone: _____ Years employed _____ Occupation/Position: _____
C) Bank Reference: _____ Phone: _____
Banks Address: _____
D) Personal Reference: _____ Phone: _____
Personal Reference: _____ Phone: _____

8) EMERGENCY CONTACT INFORMATION (list persons to contact in case of a medical or building emergency)

A) Name: _____ Phone(s): _____
Address: _____

B) Name: _____ Phone(s): _____
Address: _____

9) ASSOCIATION FEE (Buyers only)

Buyer will pay the Association's monthly assessment by: Auto Debit Bank Account _____ Check _____
(complete attached)

Purchaser(s) / Tenant(s) states that a copy of the Condominium Documents, including Declaration of Condominium Association Articles of Incorporation, By-Laws, and Rules and Regulations have been received, read, and understood. Purchaser(s) / Tenant(s) hereby agree to abide by all of the conditions and terms therein and all rules and regulations officially enacted hereafter by the Association.

Approval of this request is subject to all financial obligations to the Association, including but not limited to, maintenance fees, late charges, special assessments, legal fees, and application fees having been paid in full at or prior to closing. The Board of Directors has up to thirty (30) days to approve or deny this application.

NO APPLICANT SHALL OCCUPY A UNIT PRIOR TO AN INTERVIEW AND BOARD APPROVAL.

Purchaser / Tenant Signature Date

Purchaser / Tenant Signature Date

- Enclose a fee of **\$75** for the first adult and an additional \$50 for every adult over the age of 18 years old
Payable to:

TARPON HIGHLANDS AT LAKE TARPON SAIL & TENNIS CLUB I CONDO. ASSOC. INC.

- Enclose a copy of the Sale or Lease Contract and a copy of Driver's Licenses
• Mail all information to:

**Ameri-Tech Community Management
24701 US Highway 19 N Ste. 102
Clearwater, FL 33763**

(727) 726-8000

-----Management Use-----

Date Rc'd: _____ Fee Rec'd.: \$ _____ Check #: _____ Copy of Contract Rc'd.: _____

-----Association Use-----

Date Interviewed: _____ Interviewer _____

Signature Decision: _____

1. _____ Approve: _____ Deny: _____ Date: _____

2. _____ Approve: _____ Deny: _____ Date: _____

3. _____ Approve: _____ Deny: _____ Date: _____

CUSTOMER NUMBER 2325 - AMERI-TECH

PROPERTY / ASSOCIATION - _____

BACKGROUND INFORMATION FORM

DATE: _____

I / We _____, prospective
tenant(s) / buyer(s) for the property located at _____,

Managed By: _____ Owned By: _____,

Hereby allow TENANT CHECK and or the property owner / manager to inquire into my / our credit file, criminal, and rental history as well as any other personal record,
to obtain information for use in processing of this application. I / we understand that on my / our credit file it will appear the TENANT CHECK has made an inquiry.
I / we cannot claim any invasion of privacy or any other claim that may arise against TENANT CHECK now or in the future.

PLEASE PRINT CLEARLY

<u>INFORMATION:</u>		<u>SPOUSE / ROOMMATE:</u>	
SINGLE _____	MARRIED _____	SINGLE _____	MARRIED _____
SOCIAL SECURITY #: _____		SOCIAL SECURITY #: _____	
FULL NAME: _____		FULL NAME: _____	
DATE OF BIRTH: _____		DATE OF BIRTH: _____	
DRIVER LICENSE #: _____		DRIVER LICENSE #: _____	
CURRENT ADDRESS: _____		CURRENT ADDRESS: _____	
_____ HOW LONG? _____		_____ HOW LONG? _____	
LANDLORD & PHONE: _____		LANDLORD & PHONE: _____	
PREVIOUS ADDRESS: _____		PREVIOUS ADDRESS: _____	
_____ HOW LONG? _____		_____ HOW LONG? _____	
EMPLOYER: _____		EMPLOYER: _____	
OCCUPATION: _____		OCCUPATION: _____	
GROSS MONTHLY INCOME: _____		GROSS MONTHLY INCOME: _____	
LENGTH OF EMPLOYMENT: _____		LENGTH OF EMPLOYMENT: _____	
WORK PHONE NUMBER: _____		WORK PHONE NUMBER: _____	
HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO		HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO	
HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO		HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO	
SIGNATURE: _____		SIGNATURE: _____	
PHONE NUMBER: _____		PHONE NUMBER: _____	

IMPORTANT
Please complete this form and return it to Ameri-Tech with your owner/tenant application. Applications received without this form will not be processed.

IF THE WRONG SOCIAL SECURITY NUMBER IS SUBMITTED, A SECOND APPLICATION FEE WILL BE CHARGED TO RE-PULL THE REPORT.
 A CREDIT REPORTING SERVICE PROVIDING CREDIT REPORTS FOR REALTORS / PROPERTY MANAGERS / APARTMENT COMPLEXES / MOBILE HOME PARKS / CONDOMINIUM ASSOCIATIONS / EMPLOYERS