

POLO WEST HOMEOWNERS' ASSOCIATION, INC.

APPLICATION FOR LEASE APPROVAL CHEK LIST

(Please allow 30 days for all lease approvals)

- 1. This application, an application for lease approval, and authorization forms must be completed in detail by each proposed adult occupant, other than husband/wife or parent/dependent child (which is considered one applicant).
- 2. If any question is not answered or left blank, this application will be returned, not processed and not approved.
- 3. Please attach a copy of the lease agreement to this application.
- 4. Please attach a non-refundable processing fee of \$100.00 for each applicant, other than husband/wife or parent/dependent child (which is considered one applicant) to this application, made payable to "**Polo West HOA**".
- 5. Please attach a non-refundable processing fee of \$65.00 for each applicant, other than husband/wife or parent/dependent child (which is considered one applicant). to this application made payable to "Associated Property Management (APM). <u>ALL APM Fee's must be in the form of a CASHIER'S CHECK or MONEY ORDER.</u>
- 6. Please attach a non-refundable processing fee of \$76.00 .payable to "Associated Property Management (APM) for each person over the age of eighteen (18) that will reside in the residence for background checks. <u>ALL APM Fee's must be in the form of a CASHIER'S CHECK or MONEY</u> <u>ORDER.</u>
- 7. Acceptance of the processing fee does not in any way constitute approval of this application.
- 8. The completed application must be submitted to Associated Property Management (APM) at least 30 days prior to the desired date of occupancy.
- 9. Occupancy prior to Board approval is prohibited.
- 10. For All Leases:
 - a. No lease shall be for less than 3 months.
 - b. No more than two leases in a 12 month period are permitted.
 - c. No partial leases, sub-leases or boarder allowed. Units must be rented in their entirety.
 - d. Use of units is for single family residence only.
- 11. There is a leash requirement within the Polo West and pet owners must pick up after their pets. Other pet rules are stated in the *Homeowner Guide*.



- 12. There are published rules regulating trash and recycling containers. Violations will be fined.
- 13. The Rules & Regulations of The Polo West HOA are summarized in the *Homeowner Guide*. *Owners are fully responsible for their tenants and guests.*
- 14. The owner (landlord) must provide the lessee with a copy of the *Homeowner Guide*.

I (we) acknowledge receipt of the *Homeowners Guide* which contains the Rules and Regulations as and do hereby agree to abide by the Declaration of Covenants, Conditions, Restriction and Amendments thereto, governing Polo West Homeowners' Association.

Applicant Signature	Print Name	Date	
Co-Applicant Signature	Print Name	Date	



POLO WEST LEASE APPLICATION

ADDRESS TO BE RENTED:			
Date:	Lease Term:		
Lease Start Date:	Lease End Date:		
Current Owners Name:			
Name of Realtor: (if applicable)		TEL.:	

APPLICANT:

Last Name	First Name	Middle	Birth Date
Social Security Number	Drivers' License Nu	mber	State
Marital Status:Married	d <u>Single</u> S	eparated	
Home Phone	Cell Phone	Ema	il
CO-APPLICANT:			
Last Name	First Name	Middle	Birth Date
Social Security Number		State	
Will the above listed person(s) with dates of birth below:) be the only occupants? _	YesNo.	f no, list other occupants
TOTAL NUMBER OF OCCUPAN	ITS IN UNIT		
Name:	DOB:	Relat	ionship:
Name:	DOB:	Relat	ionship:
Name:	DOB:	Relat	ionship:



RESIDENCE HISTORY

CURRENT ADDRESS:

Street/Apt. #		City		State	ZIP
		_Own	Rent	Other	How Long
Area Code/Phone Number					
Current Landlord/Mortgage Holder		Area Code/Telephone			
PREVIOUS ADDRESS:					
Street/Apt. #		City		State	ZIP
Area Code/Phone Number		_Own	Rent	Other	How Long
Current Landlord/Mortgage Holder		Area Code/Telephone			
APPLICANT	MPLOYMENT	HISTORY			
Current Employer		Supervis	sor		How Long?
Address				Area Code/Phone Number	
Position Held	Wage			Weekly/Bi-Moi	nthly/Monthly
Previous Employer		Supervisor How Long?		How Long?	
Address				Area Code/Pho	ne Number
Position Held	Wage			Weekly/Bi-Moi	nthly/Monthly



CO-APPLICANT

Current Employer	Supervisor	How Long?
Address		Area Code/Phone Number
Position Held	Wage	Weekly/Bi-Monthly/Monthly
Previous Employer	Supervisor	How Long?
Address		Area Code/Phone Number
Position Held	Wage	Weekly/Bi-Monthly/Monthly
	BANK REFERENCES	
Bank Name		Area Code/Phone Number
Bank Name		Area Code/Phone Number
	PERSONAL REFERENCES	
Name		Area Code/Phone Number
Name		Area Code/Phone Number
Name		Area Code/Phone Number
Have you ever been convicted of a fel	ony?YesNo	
If, yes, please give a brief explanation	:	
Are you required to register with the	local police?Yes	_No



PET INFORMATION

Type (Dog, Cat, Bird, Fish)	Breed	Color	Weight
Type (Dog, Cat, Bird, Fish)	Breed	Color	Weight
Palm Beach County Rabies Licens (Required by Palm Beach County	•		
Palm Beach County Rabies Licens (Required by Palm Beach County	•		

VEHICLE INFORMATION

COMMERCIAL VEHICLES, PICK UP TRUCKS OVER ¾ TON AND DUALLY TRUCKS MUST BE PARKED IN THE GARAGE AT ALL TIMES.

Make	Model	Year	Color	Plate No.
Make	Model	Year	Color	Plate No.
Make	Model	Year	Color	Plate No.
Make	Model	Year	Color	Plate No.

Do you intend to reside here full time? _____Yes _____No. If no, how many months each year do you intend to reside in the unit?_____



APPLICANT AUTHORIZATION

I hereby authorize and request any present or former landlord, employer, school, police department, financial institution, agency or other persons having personal knowledge about me, to furnish bearer with any and all information in their possession regarding me in connection with an application for residence.

I hereby authorize Associated Property Management to obtain and verify such information including accessing consumer reporting agencies as well as performing a criminal and eviction record search.

I have been notified that a consumer report may be requested and understand that the information that Associated Property Management obtains is to be used in the processing of my purchase or lease application.

I hereby release and hold Associated Property Management Inc., its affiliates, employees and agents and any other organization that provides information from any and all liabilities arising out of the use of such information.

Applicant Signature	Applicant Print Name	Date

Applicant Signature

Applicant Print Name

Date



AMENDMENTS TO THE DECLARATION OF RESTRICTIONS OF POLO WEST ESTATES HOMEOWNERS ASSOCIATION, INC.-P.U.D.

(On June 5th, 2013 an amendment was adopted by the members of Greenview Cove and passed with sufficient votes to officially change the name to Polo West Estates Homeowners Association, Inc.)

The original Declaration of restrictions of Greenview Cove of Wellington – P.U.D. is recorded in Official Records Book 4199 at page 1933 of the Public Records of Palm Beach County.

DECLARATIONS OF RESTRICTIONS

ITEM 1: There shall be a new section "O" to Article VII of the aforesaid Declarations which shall read as follows: In the event an Owner leases his residence, the Owner and Lessee both agree to the following: If the Owner is delinquent in the payment of any assessment for more than thirty (30) days, the Association my notify the Lessee of the delinquency and in such event, the Lessee shall be obligated to commence paying all future rent payments to the Association until the delinquent assessments and related charges are paid in full to the Association. At such time, the Lessee shall resume paying rent to the Owner. During the period of time that the Lessee is paying rent to the Association, the Owner may not evict the Lessee for non-payment of rent. However, if the Lessee does not pay rent to the Association as required herein, the Association shall have the authority to evict Lessee. In such an event, the Owner shall be obligated to reimburse the Association for the costs and attorney's fees incurred by the Association.

ITEM 2: There shall be a new Section "P" to Article VII of the aforesaid Declaration which shall read as follows: Notwithstanding anything stated to the contrary in this Declaration or any other document governing the Association, If an owner is delinquent in the payment of maintenance assessments or other charges owed to the Association, the owner shall not lease his residence.

Lessee agrees and understands that they are responsible for following all of the rules and regulations as outlined in the Polo West Guidelines. Lessee agrees that they have received the rules and regulations from the Real Estate agent/Owner agent prior to completing the lease.

Also note that no Real-Estate Agent shall be allowed to hand over a gate transponder to any Lessee prior to the proper work being completed and turned in to our Guard House for entry into the community computer system. Only then shall a Lessee be allowed to enter our gates as a resident.

Owner (Print name)

Owner (Signature)

Date

Lessee (Print name)

Lessee (Signature)

Date



CERTIFICATE OF APPROVAL

Such approval has been given pursuant to the provision of the Declaration of Covenants, Conditions and Restrictions and the By-Laws of the Association.

SUCH approval has been given pursuant to all of the violations and monies due to the Association are to be resolved/paid in full at or prior to Leasing.

SUCH approval has been given pursuant to the provisions of the foresaid Declaration of Association and constitutes a waiver of the Association's right of Lessee as to the above described Lessee, as specified in the Declaration.

In the event a previously unapproved party is assuming possession of the premises, then this certificate shall be recorded without an instrument of conveyance and shall be deemed, pursuant to said party's application for approval, binding as if it has been recorded with an instrument of conveyance.

Dated:

POLO WEST HOMEOWNERS' ASSOCIATION

Witness

Authorized Agent