

MAR DEL PLATA Condominium Association, Inc.

NOTICE OF INTENTION TO SELL

In accordance with the provision of the documents, this shall constitute notice Nowith exclusive use of Parkin	e Declaration of Condominium as amended and related of our intention to sell Condominium Unit ng Space No
Very truly yours,	
Owner's Name (Print)	Date
Owner's Signature (Must be notarized	
Owner's Address	Owner's Phone Number
STATE OF FLORIDA COUNTY OF MIAMI-DADE	
The foregoing instrument was acknown 20, by who has produced day of 20	rledged before me this day of, who is personally known to me or as identification. Given under my hand this
My commission expires:	Public Notary

6423 Collins Avenue, Miami Beach, Florida 33141 Tel.: (305) 864-3232 Fax: (305) 861-1011 Email: mardelplatacondominium@gmail.com



MAR DEL PLATA Condominium Association, Inc.

Requirements for Application for Purchase, Transfer, Gift, Devise or Inheritance Approval

1. The application for purchase, application for occupancy and authorization forms must be completed in detail by each prospective adult occupant.

2. If any question is not answered or left blank, this application will be returned, not processed and not approved.

3. Attach a copy of a fully executed Sales Contract to this application.

4. Attach a non-refundable application processing and background screening fee of \$100.00 by check or money order payable to MAR DEL PLATA CONDOMINIUM ASSOCIATION, INC. for each applicant other than husband/wife or parent/dependent child (which is considered one applicant).

5. Attach clear copies of two (2) valid photo ID's, i.e., driver's license,

passport, Florida ID, etc.

6. Attach three (3) character reference letters (must not be from relatives). These letters must include address, telephone numbers and a clear copy of one photo ID's, i.e., drivers license. If identification is not provided, letter must be notarized.

7. All applicants must make themselves available for a personal interview prior to final Board of Directors approval. Occupancy prior to Board of Director approval is

prohibited.

8. One (1) pet allowed (20 lbs. or less) or two (2) together not more than 20lbs which has to be able to be carried in one arm. **Tenants are not allowed to have pets.**

9. Only one (1) assigned parking space available per unit. No boats, commercial trucks, trailers, motor homes, campers or other vehicles or objects shall be placed in or around the parking space assigned.

10. The Seller (current owner) must provide the Purchaser with a copy of all Association Documents; otherwise you can purchase them from the Association for

\$50.00

11. Upon closing, the new owner must provide the Association office with a copy of the fully executed closing statement and a copy of the warranty deed. Unless these two documents are received, no ownership changes will be effectuated in the Association' records.

12. Moving furniture IN or OUT of a unit is not permitted on Saturdays, Sundays or Holidays. Hours of moving are from 9:00 A.M. to 4:00 P.M. to be finished and out of building by 4:30 P.M. Monday thru Friday. Written authorization must be obtained at least 24 hours in advance from the management office.

Note: Pursuant to the Association's Declaration we have up to thirty (30) days after receiving your completed application and supporting documentation to process same.

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- INSTRUCTIONS: 1. If applicants are not legally married, an application on each person must be completed.

 2. Print legibly or type all information. Account and telephone numbers and complete addresses are required.

 3. If any question is not answered or left blank, this application may be returned, not processed or not approved.

 4. Missing information will cause delays in processing your application.

 5. Only the applicants are authorized to sign all forms.

 6. Any misrepresentation or falsification of information may result in your disqualification

APPLICATION FOR PURCHASE, TRANSFER, GIFT, DEVISE OR INHERITANCE APPROVAL

PLEASE PRINT OR TYPE

	Owner's Name			
Current C	Owner's Present Address			Zip
	Realtor Handling Sale			
Realty Co	,	Tel. No	Lic	ense No.
Name of I	Prospective Purchaser (as title wi	ll appear)		
Children	who will occupy the unit with yo <u>Name</u>	u:	Age	Relationship
(1)				
	rson (s) who will usually, frequer <u>Name</u>		Age	<u>Relationship</u>
(2)				
2. 3.	and accuracy of this applicatio omission of information on the I hereby agree for myself and abide by all the restrictions con which are or may in the future	ce for purchase of a unit at M. n and upon approval of the B se forms will result in the aut on behalf of all persons who n ntained in the governing docu be imposed by the MAR DEL 1	AR DEL PLATA CONDOM oard of Directors. Any omatic disqualification nay use the unit which ments of the Condominum A	INIUM is conditioned upon the truly misrepresentation, falsification of my application. I seek to purchase that I/they will nium Association and restrictions association, INC.
4.	I understand that I will be advised in writing of denial of this application. OCCUPANCY PRIOR TO BOARD OF DIRECTOR APPROVAL IS PROHIBITED.			
5.	Warranty Deed prior to move	in date.		ing Statement and a copy of the
6.	I understand that we are only permitted one (1) pet, 20 lbs. or less, or two (2) pets together not more than 20 lbs. which has to be able to be carried in one arm. TENANTS ARE NOT ALLOWED TO HAVE PETS.			
7.	all investigation of my backgro Directors, Management and U information contained herein	ound as the Board may deem I NITED SCREENING SERVICESC and the attached application I gement of MAR DEL PLATA CO e in connection with the use o	necessary. Accordingly ORPORATION to make s may be used in such inv NDOMINIUM ASSOCIATI	NC. may cause to be instituted as so, I specifically authorize the Boarwich investigation and agree that twestigation, and that the Board of ON, INC. itself shall be held harmlained herein and attached application.
king the fo	oregoing application, I am aware will be given for any action taken	that the decision of the MAR I by the Board of Directors. I	DEL PLATA CONDOMINI agree to be governed by	UM ASSOCIATION, INC. will be final y the determination of the Board o



MAR DEL PLATA CONDOMINIUM ASSOCIATION, INC.

APPLICATION FOR PURCHASE/LEASE/OCCUPANCY

APPLICANT INFORMATION

PLEASE PRINT OR TYPE

Applicant's Name First	Middle		Last	
Date of Birth	Social Secu	rity No		
Month/Day/Year				
Driver's License No. or Florida ID No			State	
Automobile Make/Color/Year			License No	
Home Telephone No. ()		Work Telephone No.	()	
Cellular No. ()		-Mail Address		
Marital Status Single	Married	Divorced		
Spousal Information, if married:				
Spouse's Name First	Middle		Last	
Date of Birth	Social S	ecurity No.		
Month/Day/Year				
Driver's License No. or Florida ID No			State	
Automobile Make/Color/Year			License No	
Home Telephone No. ()	Work Telephone No. ()			
Cellular No. ()		E-Mail Address		
Any Children? (yes)	(no) If yes, how many pla	n to reside with you?	How old are the children that wil	
reside with you?				
* Please note that children of applicants	over 18 years old must	submit a separate oc	cupancy application (Initials	
required).				
Do you own pets? (yes) (Only one (1) pet allowed. Must be of a				
In case of emergency please notify:				
<u>Name</u>	Address	Tel. No.	Relationship	

	RESIDE	NCE HISTORY			
PresentAddress					
C'.		Ctoto		Zip Code	
City	State Own or Rent?			Zip Code	
IF YOU RENT, YOU MUST PROVID			NT- ()		
Landlord's Name			No. ()		
Landlord's Email					
Landlord's Address					
City		State		Zip Code	
Previous Address					
City		State		Zip Code	
How long did you live here?			r Rent	-	
How long aid you live here?					
	EMPLOY	MENT HISTOR	RY		
Present Employer			Tel No. ()_		
Employer's Address					
				Zip Code	
City		State	Manushla Incomo C	•	
Length of employment					
Supervisor's Name	·	Tel. No. ()		
Supervisor's Email Address					
Spousal information, if married:					
Present Employer			Tel No. ()		
Employer's Address					
City	· · ·	State		Zip Code	
	BANK REFE	RENCES			
(1) 7 11 11			Tel No (
(1) Bank's NameAcct. No					
(Svgs)		(5)			
Address		Citv		State	Zip
(2) Bank's Name					
How Long?Acct. No					
Address					

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	CHARACTER REFERENCES				
Provide Character Reference letters to Mar del Plata Condominium. Please note Character References can not be relatives.					
(1) Name		Res. Tel. No.	Busir	ness Tel. No	
	City		State	Zip Code	
(2) Name	-	Res. Tel. No	Business Tel. No.		
	City		State	Zip Code	
(3) Name	•	Res. Tel. No	Business Tel. No.		
		\			
	City		State	Zip Code	
CONDOMIN not be liable of DEL PLATA By signing, the Corporation, Facts may be	IIUM ASSOCIATION responsible for an CONDOMINIUM the applicant (s) recomay investigate the made to the Association.	y inaccurate information in ASSOCIATION, INC. cau gnizes that the Association information supplied by the	CREENING SERV In the investigation a Issed by such omission In or their agent, United In a policant (s) and a In a part of the a	ICES CORPORATION Will and related report to MAR ons or illegibility. ted Screening Services a full disclosure of pertinent pplicant's character, general	
Applicant's	Signature	Date	Spouse's Signa	ture Date	

Applicant's Signature