

RIDGEPOINTE WOODS ASSOCIATION, INC. SALE AND LEASE APPLICATION APPROVAL

The Association shall review the proposed Sale or Lease Application within ten (10) business days of receipt of required information, documents and fees. A Certificate will be issued indicating the Association's approval of the transaction. In the event of a sale it shall then be the responsibility of the purchaser to furnish the Association with a recorded copy of the deed of conveyance indicating the owner's mailing address for all future assessments and other correspondence from the Association. Please ensure all required items are submitted – doing so will ensure the application is processed in a timely manner.

APPLICANT must submit

- Completed Purchase and Lease Information Application
- Prospective Owner / Lessee Acknowledgement
- Signed copy of Sale or Lease Contract
- FOR A LEASE: submit the Applicant Authorization form for the credit and background check for each applicant over age 18. The credit score must be at least 660 and no felony charges in the background.
- FOR A LEASE: submit a common area deposit \$700.00 payable to RIDGEPOINTE WOODS ASSOCIATION, INC.
- \$100.00 Application Fee (non-refundable) made payable to GRS Management Associates, Inc. (certified bank check or money order only)
- \$100.00 Application Fee for each prospective owner or tenant 18 years or older (non-refundable) made payable to RIDGEPOINTE WOODS ASSOCIATION, INC. (certified bank check or money order only)
- FOR A LEASE: the owner submits the RIDGEPOINTE WOODS ASSOCIATION, INC. direct Rent Collection Lease Addendum
- Age Verification Certificate

Items must be submitted to

GRS Management Associates, Inc.
3900 Woodlake Blvd., Suite 309
Lake Worth, Florida 33463

Thank you in advance for your cooperation in following this process. If you have any questions please contact GRS Management Associates, Inc. 561-641-8554 or email customerservice@grsmgt.com

RIDGEPOINTE WOODS ASSOCIATION, INC.
PURCHASE AND LEASE INFORMATION APPLICATION

PURCHASE / LEASE INFORMATION

Address: _____ Closing/Move in Date: _____

Agent's Name: _____ Email: _____ Phone: _____

CURRENT HOMEOWNER INFORMATION

Name(s): _____ E-Mail Address: _____

Phone: _____ Alternate Phone: _____

PURCHASER/LESSEE INFORMATION (List Occupants over 18 use additional forms if necessary)

Name: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____

Current Address: _____

Check which address to use for mailings: Association Address Alternate Address

Alternate Mailing Address: _____

VEHICLES (List all vehicles, use additional forms if necessary)

Make: _____ Model: _____ Tag Number: _____

Make: _____ Model: _____ Tag Number: _____

PLEASE SIGN BELOW

Homeowner: _____ Date: _____

Purchaser/Lessee: _____ Date: _____

Purchaser/Lessee: _____ Date: _____

Purchaser/Lessee: _____ Date: _____

Complete this form and submit to GRS Management Associates, Inc.
3900 Woodlake Blvd., Suite 309, Lake Worth, Florida 33463 - An interview may be required.

Association Approval: _____ Date: _____

**RIDGEPOINTE WOODS ASSOCIATION, INC.
PROSPECTIVE OWNER/LESSEE ACKNOWLEDGEMENT**

The undersigned being a prospective Owner or Lessee applicant of address:

In RIDGEPOINTE WOODS ASSOCIATION, INC. acknowledges that (she, he, or they) have read, understand, and agree to follow and abide by all the terms and conditions of the following:

- (a) Declaration of Covenants, Restrictions and Easements: RIDGEPOINTE WOODS ASSOCIATION, INC.
- (b) Bylaws: RIDGEPOINTE WOODS ASSOCIATION, INC.
- (c) Current Rules & Regulations: RIDGEPOINTE WOODS ASSOCIATION, INC.
- (d) All Amendments for RIDGEPOINTE WOODS ASSOCIATION, INC.

Dated: _____ Purchaser/Lessee Signature: _____

Dated: _____ Purchaser/Lessee Signature: _____

Dated: _____ Purchaser/Lessee Signature: _____

The documents listed above may be obtained from the GRS Management Associates, Inc. website: www.grsmgt.com

This form must be completed for all applicants over age 18
If additional applicants, please use an additional form.

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 LexisNexis, a service of LexisNexis 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 will be requested and understand that the information that LexisNexis obtains is to be used in the processing of my rental application.

I hereby release and hold harmless LexisNexis, a service of LexiNexis 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 in connection with LexisNexis.

Print Name: _____

Print Name: _____

Signature: _____

Signature: _____

DOB: _____

DOB: _____

DL#: _____

DL#: _____

SS#: _____

SS#: _____

PLEASE INCLUDE A COPY OF THE DRIVERS LICENSE

**RIDGEPOINTE WOODS
HOMEOWNERS ASSOCIATION
DIRECT RENT COLLECTION
LEASE ADDENDUM**

RE: Property Address: _____

Please be advised that on June 1, 2010 Governor Christ signed into law Senate Bill 1196. This bill amends Florida Statutes 720, more specifically creates FS 720.3085, FS.

Whereby the Association is authorized to demand rent payments of any future monetary obligation from the tenant of a unit owner, if the unit owner is delinquent in payment of monetary obligations to the association.

The owner of your property, _____, if ever indebted to the association, according to FS 720.3085, FS, the association is entitled to demand your rent be paid to directly to the association.

In the event that you do not tender the rent on your unit to the association until the owners account is current will enable the association to file an eviction for your removal under procedures in FS 720.3085, FS.

Should you be notified by the association of a delinquency in relation to this unit, you agree to pay your rent to NO other party other than:

RIDGEPOINTE WOODS ASSOCIATION, INC.
c/o GRS Management Associates, Inc.
3900 Woodlake Blvd., Suite 309, Lake Worth, FL 33463
Phone: (561) 641-8554

Please be advised that your rent must be received in our office no later than the 5th day of each month.

Your failure to tender your monthly rent to the association, will result in an action for eviction being filed against any and all persons in possession of this property. The undersigned agrees to the entire forgoing lease addendum

(APPLICATION WILL NOT BE PROCESSED IF THE OWNER DOES NOT SIGN)

Owner Print Name _____ Date _____

Owner Signature _____ Date _____

Lessee Signature _____ Date _____

Lessee Print Name _____ Date _____

**RIDGEPOINTE WOODS ASSOCIATION, INC.
AGE VERIFICATION CERTIFICATE**

The following information must be furnished by the owner or owners of each residence so that the Association may monitor the percentage of residences occupied by at least one person 55 years of age or older in order to preserve the status of RIDGEPOINTE WOODS ASSOCIATION, INC. as a community of housing for older persons in accordance with the RIDGEPOINTE WOODS ASSOCIATION, INC. documents and the Federal Fair Housing Act.

Unit: _____

Address: _____

Owner(s) as recorded on the last deed:

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Occupant(s) include owner(s) above if occupant(s)

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

The undersigned certify that the above information is true and correct and that within fifteen (15) days after any changes thereof the undersigned will notify the Board of Directors of RIDGEPOINTE WOODS ASSOCIATION, INC. of such change in writing.

Owner Signature: _____ Date: _____

Owner Signature: _____ Date: _____

Owner Signature: _____ Date: _____

RIDGEPOINTE WOODS ASSOCIATION, INC.

INTENT TO SELL OR LEASE

In accordance with the requirements, where a transfer of interest is contemplated, I hereby notify you of my intent to ___ sell or ___ lease Unit # ___ in the above named Association. I am, or will become familiar with said requirements in a transfer of interest and will fully acquaint a prospective purchaser or tenant with them.

The contact person is to be:

Owner: _____ FL# _____, Out of state # _____

Real Estate Agency & Agent: _____

Office # _____ Home # _____

Addl. Information _____

Sale: Listing Price: \$ _____

Availability Information: _____

Lease Information & rental date: _____

Lease Dates: Beginning - _____ Ending - _____

Term: _____

According to RidgePointe Woods, Inc., Rules, all Rentals and Leases must be for a minimum of three (3) months, with only one (1) rental allowed in a twelve- (12) month period. The signing this Document acknowledges that I understand and will abide by the above.

This Notice is given

At Boynton Beach,

Palm Beach County, Florida, on the _____ day of _____, 20__.

Signature(s) of owner or owners of record

Signature

Signature

Printed

Printed