

# Springdale Homeowners' Association, Inc.

## 590 Springdale Blvd; Palm Springs, FL 33461

T: 561-968-2182

### Lease Application Instructions/Checklist

***Please return the completed package to the Carolina Management Office for processing.  
A complete package includes:***

- A Lease Application - the remainder of this package
- Copy of driver license(s), and vehicle registrations
- \$100.00 Background Screening Fee (non-refundable) per applicant (unless married or dependent) made payable to **Carolina Management Services**
- The Application Fee is \$100.00 per adult applicant (over 18 years of age). The application fee is non-refundable. No exceptions. Secured funds (certified bank check or money order) for made payable to "**Springdale HOA**".
- A copy of your completed Lease agreement between you and your tenant.
- Signed copy of Rules and Regulations - signed by all applicants

A common area security deposit of \$500 is required. This may be in addition to any deposit required by the owner for the unit itself. Checks should be paid payable to **Springdale Homeowners' Association, Inc.**

This Lease Application, along with all information and materials requested therein, must be completed and mailed or dropped off at the Carolina Management office **at least fifteen** (15) days prior to the expected move in date. A lease is not effective without prior written approval by the Board.

**Applications will not be accepted via fax or email. If an application is submitted incomplete, it will not be accepted or processed until all the required information is received. Please return this completed application, along with payment to the address below:**

**Carolina Management Services  
6778 Lantana Rd; Suite #9  
Lake Worth, FL 33467**

## Lease Application

Property Address and Unit #: \_\_\_\_\_

Term of Lease: Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

### **General Submission Requirements:**

- \$100.00 Background Screening Fee (non-refundable) per applicant over 18yrs of age made payable to **Carolina Management Services**
- The Application Fee is \$100.00 per adult applicant (over 18 years of age). The application fee is non-refundable. No exceptions. Secured funds (certified bank check or money order) made payable to "**Springdale HOA**".
- A common area security deposit of \$500. This may be in addition to any deposit required by the owner for the unit itself. Checks should be paid payable to **Springdale Homeowners' Association, Inc.** This is a security deposit to protect against any damages to the common area caused by the renter or his/her guests. This deposit will be kept in a non-interest bearing account. Within 15 days after the expiration date of the lease, kindly request in writing the refund of the deposit.
- Completed Lease Application
- Copy of driver license(s) and vehicle registrations
- A copy of your completed Lease agreement between you and your tenant.
- Signed copy of Rules and Regulations by all applicants

*I/We certify that the information requested above and contained in this application are attached, true and correct. I understand that any falsification, misrepresentation, or omission is grounds for refusal to approve this sale application.*

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Co-Applicant Signature**

**Current Property Owner Information:**

Owner Name: \_\_\_\_\_

Owner home phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

New Mailing Address: \_\_\_\_\_

Owner email: \_\_\_\_\_

**Lease Applicant(s) Information:**

Applicant Name: \_\_\_\_\_

Applicant home phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Applicant email: \_\_\_\_\_

Present Address: \_\_\_\_\_

How long at this address: \_\_\_\_\_ If less than one (1) year, include previous addresses?

\_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**Employed by:** \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

How long: \_\_\_\_\_ Dept or Position: \_\_\_\_\_

Monthly Income: \_\_\_\_\_

**Bank reference:** \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

How Long: \_\_\_\_\_

Check Account # \_\_\_\_\_ Savings Account # \_\_\_\_\_

**Occupant Information:**

Will there be occupants other than the immediate family: [ ] Yes [ ] No

If yes, name(s), relationship, and age(s): \_\_\_\_\_

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**Automobile Information:**

**Vehicle #1**

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Color: \_\_\_\_\_

Year: \_\_\_\_\_

State: \_\_\_\_\_

Plate #: \_\_\_\_\_

*Vehicle is registered to:*

\_\_\_\_\_

**Vehicle #2**

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Color: \_\_\_\_\_

Year: \_\_\_\_\_

State: \_\_\_\_\_

Plate #: \_\_\_\_\_

*Vehicle is registered to:*

\_\_\_\_\_

**Real Estate Information:**

Name of Real Estate Agency representing you (if applicable): \_\_\_\_\_

Agent: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

## APPLICATION FOR LEASE

I/We acknowledge receipt of the Association's Rules and Regulations, specifically including the following:

- All applicants must be interviewed prior to final approval by the board of directors. Occupancy prior to board approval is prohibited.
- No lease shall be for less than Twelve (12) months.
- No more than one (1) lease in any calendar year is permitted.
- Renewals of leases are subject to re-approval by the board of directors.
- Lessee is permitted One Cat or Dog and must abide by Springdale Homeowners' Association, Inc. Rules and Regulations regarding pets.
- Use of this unit is for single family residence only. No corporation, company, partnership, or trust may lease an apartment, and no business activity may be run from a unit.
- Lessees are restricted to no more than two (2) vehicles per unit.
- Lessee of a unit must register their vehicles and display a decal issued by the Association in each vehicle in the place directed by the Association. The Lessee of a unit shall be issued no more than two (2) decals
- No resident may park any vehicle unless an issued decal is properly displayed on the vehicle.
- Occupants may park only in their unit assigned parking spaces.
- Common area keys and codes may only be possessed by owners, their family and guests, and approved tenants.
- The owner (landlord) has provided the lessee with a copy of the Association rules and regulations.

As the lessee, I hereby agree for myself and on behalf of all persons who may use the unit which I seek to lease:

- A. I, and any of my guests, will abide by all of the restrictions contained in the Homeowners Association By-Laws, Rules and Regulations and other guidelines which are, or may in the future be imposed by Springdale Homeowners' Association, Inc.
- B. I understand that there is a restrictions/rules and regulations on pets.
- C. I understand that I must be present when any guests, relatives, visitors, or children who are not contractual residents of the apartment will be occupying the apartment or using any of the recreational facilities.
- D. I understand that occupancy of this apartment in my absence is prohibited, and that subleasing of this unit is prohibited.

I/We agree to observe and abide by the terms and conditions stated in these documents.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Applicant Printed Name:** \_\_\_\_\_

**Co - Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Co - Applicant Printed Name:** \_\_\_\_\_

# Springdale Homeowners' Association, Inc.

## CERTIFICATE OF APPROVAL FOR LEASE

This is to certify that the following named lease applicant has hereby obtained the approval to lease by the Board of Directors of Springdale Homeowners Association, Inc.

Address: \_\_\_\_\_

Owner: \_\_\_\_\_

Tenant: \_\_\_\_\_

Lease Terms: \_\_\_\_\_

\_\_\_\_\_  
Signature and Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\*\*\*\*\*

State of Florida Palm  
Beach County

The foregoing instrument was acknowledged before me this day \_\_\_\_\_(day) of \_\_\_\_\_  
(month), \_\_\_\_\_(year) by \_\_\_\_\_(name) \_\_\_\_\_  
(title), who is personally known or provided \_\_\_\_\_as identification and who did/did not take an oath.

Signature of Notary: \_\_\_\_\_

(Seal)

**DISCLOSURE AND AUTHORIZATION AGREEMENT**  
**REGARDING CONSUMER REPORTS**

**DISCLOSURE**

SPRINGDALE HOA may request one or more consumer reports or investigative consumer reports about you for **residential** purposes. These reports may include information on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which may be used as a factor in making a **residential**-related decision about you. Such information may include credit reports, criminal history, civil records, etc. or personal interviews with your current or prior employers, neighbors, friends, or associates, or with others who may have knowledge concerning any such items of information.

**AUTHORIZATION**

By signing below, I agree that I have read and understand the foregoing Disclosure and hereby authorize AmeriCheckUSA to obtain consumer reports or investigative consumer reports about me for **residential** purposes. I further authorize SPRINGDALE HOA and AmeriCheckUSA to share the information with any person involved in the **residential** decision about me. This Authorization is no longer valid after 90 days of date signed, and you also agree that a fax or photocopy of this authorization with your signature be accepted with the same authority as the original.

**READ, ACKNOWLEDGED AND AUTHORIZED**

\_\_\_\_\_  
Print Name (One Person Per Form)

\_\_\_\_\_  
Signature (One Person Per Form)

\_\_\_\_\_  
Date

- For California, Minnesota or Oklahoma applicants only, if you would like to receive a copy of the report, if one is obtained, please check the box.

Carolina Mgmt - Springdale / Ref# \_\_\_\_\_

**RESIDENTIAL SCREENING REQUEST**

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

SSN: \_\_\_\_\_ DOB (MM/DD/YYYY): \_\_\_\_\_

Tel#: \_\_\_\_\_ Cel#: \_\_\_\_\_

Are you Buying or Renting? \_\_\_\_\_

Have you ever been arrested before? \_\_\_\_\_

Employer: \_\_\_\_\_ N/A \_\_\_\_\_ Tel#: \_\_\_\_\_ N/A \_\_\_\_\_

Supervisor: \_\_\_\_\_ N/A \_\_\_\_\_ Salary: \_\_\_\_\_ N/A \_\_\_\_\_

Employed From: \_\_\_\_\_ N/A \_\_\_\_\_ To: \_\_\_\_\_ N/A \_\_\_\_\_ Title: \_\_\_\_\_ N/A \_\_\_\_\_

Landlord: \_\_\_\_\_ N/A \_\_\_\_\_ Tel#: \_\_\_\_\_ N/A \_\_\_\_\_

Property Name: \_\_\_\_\_ N/A \_\_\_\_\_ Rent: \_\_\_\_\_ N/A \_\_\_\_\_

Rented From: \_\_\_\_\_ N/A \_\_\_\_\_ To: \_\_\_\_\_ N/A \_\_\_\_\_

*I have read and signed the Disclosure and Authorization Agreement.*

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_