

SHANGRI-LA AT WOODMONT HOA

C/o TMG Management
3303 West Commercial Boulevard, Suite 170
Fort Lauderdale, Florida 33309
954-782-7820 954-782-7823 Fax

INSTRUCTIONS FOR APPLICATION FOR OCCUPANCY

Please return this completed form and all documentation to TMG Management

THIS APPLICATION IS FOR ONE PERSON OR MARRIED COUPLE ONLY **A COPY OF A MARRIAGE CERTIFICATE WILL BE REQUIRED**

The following documentation **MUST** accompany your application or the application will be considered **INCOMPLETE** and will not be processed until all documentation has been received.

- Copy of Driver's License or Government Issued ID Card
- Copy of Vehicle Registration
- Copy of Lease/Sales Contract signed by both parties
- Nonrefundable application fee of \$100.00 per application in the form of a money order or cashier's check made payable to Shangri-la Homeowners Association

If this is a lease the unit may not be rented if the homeowner is behind in their maintenance/special assessment payments or have outstanding violations. The unit may not be rented for less than one year. All keys must be obtained through the landlord.

If this is a sale a copy of the documents should be provided to you at the closing. Should you not be provided with the documents a copy may be obtained from the Association for a fee of \$50.00. All violations must be corrected prior to application approval. Upon closing a copy of your Warranty Deed must be provided to the Association.

- **Units may not be rented during the first year of ownership.**
- **Units are for residential purpose only. No commercial or recreational vehicles may be parked or stored within the community.**
- **A credit score under 675 will require one year's maintenance to be held in escrow for two years.**
- **All pets must first receive written approval from the Association. No pit bulls are allowed. A picture of the pet must accompany your application. The Association also reserves the right to have any pet removed from the property should the pet become an unreasonable nuisance. Owners are liable for any and all damage caused by their pets.**

PLEASE MAKE SURE ALL DOCUMENTS ARE LEGIBLE
APPROVAL WILL NOT BE GIVEN UNTIL ALL DOCUMENTS AND PAYMENT ARE RECEIVED.

IT IS NOT THE RESPONSIBILITY OF THE MANAGEMENT OFFICE OR THE HOA TO OBTAIN MISSING DOCUMENTS.

SHANGRI-LA HOMEOWNERS ASSOCIATION APPLICATION FOR OCCUPANCY

PLEASE USE BLACK INK AND FILL IN ALL BLANKS. IF ANY QUESTION IS NOT ANSWERED OR LEFT BLANK, THIS APPLICATION MAY BE RETURNED, NOT PROCESSED, AND/OR NOT APPROVED. PRINT LEGIBLY OR TYPE ALL INFORMATION. MISSING INFORMATION WILL CAUSE DELAYS.

ALL INFORMATION ON THIS APPLICATION WILL BE VERIFIED.

THIS APPLICATION IS FOR A SINGLE PERSON OR A MARRIED COUPLE ONLY

**NOTE: ALL INFORMATION SUPPLIED IS SUBJECT TO VERIFICATION.
ALL TELEPHONE NUMBERS MUST BE ABLE TO BE REACHED BETWEEN 9AM-5PM**

Please check: Purchase ___ Lease ___ Property Address _____ Date ___ / ___ / ___

Full Name _____ Date of Birth ___ / ___ / ___ Social Security# ___ - ___ - ___

Single ___ Married ___ Separated ___ Divorced ___ - How long? _____ Maiden Name _____

Have you been convicted of a crime? Yes ___ No ___ If yes, date(s) ___ / ___ / ___ County _____

Charge(s) _____

Spouse Name _____ DOB ___ / ___ / ___ Social Security# ___ - ___ - ___

Maiden Name _____ Been convicted of a crime? Yes ___ No ___ If yes, date(s) ___ / ___ / ___

County _____ Charge(s) _____

Number of adults (over age 18) who will occupy unit ___ Description of Pet(s) _____

Names and ages of others who will occupy unit _____

Applicant's Cellular Telephone Number (____) ____ - ____ Applicant's email address _____

In case of emergency _____ Phone (____) ____ - ____ Address _____

PART I – RESIDENTIAL HISTORY

PLEASE PRINT FULL ADDRESS, INCLUDING UNIT/APT NUMBER, CITY, STATE & ZIP CODE

Present Address _____ Phone (____) ____ - ____

Apt/Condo Name _____ Phone (____) ____ - ____ From ___ / ___ / ___ to ___ / ___ / ___

Own Home ___ Lived w/Family ___ Rented Home ___ Rented Apt ___ Other ___ Rent/Mortgage Amount \$ _____

Name of Landlord _____ Address _____ Phone (____) ____ - ____

Name of Mortgage Holder _____ Loan # _____ Phone (____) ____ - ____

Previous Address _____ Phone (____) ____ - ____

Apt/Condo Name _____ Phone (____) ____ - ____ From ___ / ___ / ___ to ___ / ___ / ___

Own Home ___ Lived w/Family ___ Rented Home ___ Rented Apt ___ Other ___ Rent/Mortgage Amount \$ _____

Name of Landlord _____ Address _____ Phone (____) ____ - ____

Name of Mortgage Holder _____ Loan # _____ Phone (____) ____ - ____

PART II – EMPLOYMENT REFERENCES (PLEASE INCLUDE A COPY OF EARNINGS STATEMENT)

Employed by _____ Phone (____) ____ - _____

Dates of Employment ____/____/____ to ____/____/____ Position _____ Fax (____) ____ - _____

Monthly Gross Income \$ _____ Address _____

Spouse Employed by _____ Phone (____) ____ - _____

Dates of Employment ____/____/____ to ____/____/____ Position _____ Fax (____) ____ - _____

Monthly Gross Income \$ _____ Address _____

PART III – BANK REFERENCES (PLEASE INCLUDE A RECENT COPY OF A BANK STATEMENT)

Bank Name _____ Checking Acct# _____ Phone (____) ____ - _____

Address _____ Fax (____) ____ - _____

Bank Name _____ Savings Acct# _____ Phone (____) ____ - _____

Address _____ Fax (____) ____ - _____

PART IV – CHARACTER REFERENCES (No Family Members)

Please notify Character References that we will be contacting them to obtain a reference

Name #1 _____ Home Phone (____) ____ - _____

Address _____ Business Phone (____) ____ - _____

Email Address _____ Cellular Phone (____) ____ - _____

Name #2 _____ Home Phone (____) ____ - _____

Address _____ Business Phone (____) ____ - _____

Email Address _____ Cellular Phone (____) ____ - _____

Name #3 _____ Home Phone (____) ____ - _____

Address _____ Business Phone (____) ____ - _____

Email Address _____ Cellular Phone (____) ____ - _____

Driver’s License Number (Primary Applicant) _____ State Issued _____

Vehicle Make _____ Model _____ Year _____ Plate # _____

Driver’s License Number (Secondary Applicant) _____ State Issued _____

Vehicle Make _____ Model _____ Year _____ Plate # _____

If this application is not legible or is not completely filled out, Associated Credit Reporting, Shangri-la at Woodmont Homeowners Association and TMG Management will not be liable or responsible for any inaccurate information in the investigation and related report to the Association’s Board of Directors caused by such omissions or illegibility.

By signing, the applicants recognize that Shangri-la at Woodmont Homeowners Association and Associated Credit Reporting will investigate the information supplied by the applicant, and a full disclosure of pertinent facts will be made to the Association’s Board of Directors as well as TMG Management. The investigation may be made of the applicant’s character, general reputation, personal characteristics, credit standing, police arrest record and mode of living as applicable. This form is for the exclusive use of Associated Credit Reporting, Shangri-la at Woodmont Homeowners Association and TMG Management.

Applicant Signature _____ Date _____ Spouse Signature _____ Date _____

8795 West McNab Road, First Floor, Tamarac, Florida 33321
www.associatedcreditreporting.com

AUTHORIZATION FORM

I/We hereby authorize **Associated Credit Reporting, Inc.** to obtain data to verify any and all information they request with regards to my/our Application for Occupancy, specifically the verification of my bank account(s), credit history, residential history, criminal record history, employment verification and character references.

I/We hereby waive any privileges I/we may have with respect to the said information in reference to its release to the aforesaid party. Information obtained for this report is to be released to the authorized party designated on the Application for Occupancy, for their exclusive use only. PLEASE INCLUDE COPY OF DRIVER'S LICENSE TO CONFIRM IDENTITY. If you do not have a driver's license, please include a copy of your Passport or current government issued identification card.

I/We acknowledge our rights as stated in the Fair Credit Report Act that I/we are entitled to a copy of the report upon proper written request and can dispute any inaccurate information for re-verification. I/We understand that Associated Credit Reporting, Inc. is not directly involved in the approval or denial of any applicant. The information received by Associated Credit Reporting, Inc. shall be held in strict confidence, protected as governed under the Fair Credit Reporting Act, and will never be released to any third party other than the designated recipient. I/We further understand that this is a non-refundable process.

By signing below, I/We further state the Application for Occupancy and Authorization Form were signed by me/us and was not originated with fraudulent intent by me/us or any other person and that the signature(s) below are my/our own proper legal signature. I/We certify (or declare) under penalty of perjury that I/We agree to the foregoing and; that all answers and information contained on the Application for Occupancy are true and correct and will hold Associated Credit Reporting, Inc. harmless from the result of the investigation.

(Applicant's Signature)

(Spouse's Signature)

(Applicant's Name Printed)

(Spouse's Name Printed)

(Date Signed)

(Date Signed)