c/o Brock Property Management, Inc.
P.O. Box 770850, Coral Springs, FL 33077
Office: 954-753-2675 Fax: 954-340-8541
brock@brockpm.com
www.brockpm.com

Application Checklist

- **★** Please read the following pages and make sure <u>all</u> documents are returned fully completed.
- ***** IMPORTANT: We cannot begin to process your application until <u>all</u> documents listed below are received.
- Application Form
- Fully Executed Purchase Contract or Lease Agreement (Note: Leases may only be for a twelve (12) month period)
- Residential Screening Request (these must be completed individually by any proposed resident 18 years or older)
- Disclosure Authorization Agreement (these must be completed individually by any proposed resident 18 years or older)
- Payment

\$250 application fee per applicant (payable to Brock Property Management - cashier's check or money order)

- Color Copy of State Issued Photo ID (for each applicant)
- Color Copy of Social Security Card (for each applicant)

Acknowledgment of Rules & Regulations Form

(these must be signed by each applicant)

Note for all Applications:

- Current Owner(s) must not have any open violations
- Current Owner(s) must be current on their HOA dues
- All applicants must meet with a board officer prior to receiving a certificate of approval

This process may take up to 30 days once all required documents are received. The only way to guarantee a quicker turnaround time is to pay a \$50.00 per applicant rush fee in addition to the application and administrative fee(s) to expedite your application which will then be processed in 14 days. We cannot guarantee a timeframe for international applicants as those background check timeframes vary.

<u>Please do not contact the office to inquire about the status of your application until at least 10 days after submission. Note: Status requests are only accepted via email – phone calls are not accepted.</u>

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Contact Information

Desired Occupancy/Closing Date: _			
Current Owner Name(s):	Purchaser/Tenant Name(s):		
Phone:	Phone:		
Email:	Email:		
Phone:	Phone:		
Email:	Email:		
Owner Agent Name(s):	Purchaser/Tenant Agent Name(s):		
Phone:	Phone:		
Email:	Email:		
Phone:	Phone:		
Email:	Fmail:		

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Application for Occupancy

This Application is for (select one): Purchase	Lease		
Desired date of occupancy:	Total # of occup	ants over the age	of 18:
Property Address:			
Applicant #1 Name:			
Phone #:			
Current Address:			
E-mail Address:			
Applicant #2 Name:			
Phone #:			
Current Address:			
E-mail Address:			
Q1) Have you ever been convicted of a felony? Q2) Do you intend to operate a business from this add Q3) Do you own a commercial vehicle, boat, or RV?	_Yes ress? _Yes	s No	Applicant #2Yes NoYes NoYes NoYes No
Character Reference:			
Phone #:			
I (we) hereby affirm that this information is true and co	rrect.		
Signature of Applicant # 1:			
Date:			
Signature of Applicant # 2:			
Date:			

RESIDENTIAL SCREENING REQUEST

First Name:				
Middle Name:				
Last Name:				
Address:				
City:				
State:				
Zip Code:				
SSN:				
DOB (MM/DD/YYYY):				
Home Phone Tel#:				
Mobile Phone Cel#:				
Are you Buying or Renting?				
Have you ever been arrested before?				
I have read and signed the Disclosure and Authorization Agreement.				
SIGNATURE: DATE:				
OFFICIAL USE ONLY - DO NOT WRITE BELOW THIS LINE				
BROCK MGMT				
Ordered By APPLICATIONS DEPARTMENT				
Reference WINDY CREEK HOA				

DISCLOSURE AND AUTHORIZATION AGREEMENT REGARDING CONSUMER REPORTS

DISCLOSURE

A consumer report and/or investigative consumer report including information concerning your character, employment history, general reputation, personal characteristics, criminal record, education, qualifications, motor vehicle record, mode of living, credit and/or indebtedness may be obtained in connection with your application for and/or continued residence. A consumer report and/or an investigative consumer report may be obtained at any time during the application process or during your residence. Upon a timely written request of management, and within 5 days of the request, the name, address and phone number of the reporting agency and the nature and scope of the investigative consumer report will be disclosed to you. Before any adverse action is taken, based in whole or in part on the information contained in the consumer report, you will be provided a copy of the report, the name, address and telephone number of the reporting agency, and a summary of your rights under the Fair Credit Reporting Act.

AUTHORIZATION

You hereby authorize and request, without any reservation, any present or former employer, school, police department, financial institution, division of motor vehicles, consumer reporting agency, or other persons or agencies having knowledge about you to furnish AmeriCheckUSA with all background information in their possession regarding you, in order that your residence qualifications may be evaluated. You also agree that a fax or photocopy of this authorization with your signature be accepted with the same authority as the original.

Print Name Signature Date

READ, ACKNOWLEDGED AND AUTHORIZED BY

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.

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Acknowledgement of Rules & Regulations

- By signing below, I certify that I have received and will read a copy of the documents for Windy Creek. I agree that I will abide by these Rules and Regulations.
- By signing below, I am confirming that I have included a copy of the sales contract or lease contract along with my application.
- By signing below, I agree to provide a copy of the warranty deed I receive to the Association no later than forty-five (45) days after closing.
- By signing below, I agree to inform the Association of any additions or deletions made to the lease and/or warranty deed, as this may affect who is or is not an approved owner/lessee of said property.

Property Address:	:	 	 	
Print Name:			 	
Signature:		 	 	
Date:			 	
Print Name:		 	 	
Signature:		 		
Date:				