3900 Woodlake Blvd., Suite 309, Lake Worth, FL 33463 | Phone (561) 641-8554

EASTRIDGE HOMEOWNERS ASSOCIATION, INC.

APPLICATION FOR LEASE

- ***$200.00 Non-refundable application processing fee for each applicant (unless married) and payable to GRS Community Management in the form of a money order or cashier's check.***

INDIVIDUAL COMMUNITY REQUIREMENT CHECKLIST

_____ Copy of lease contract is attached.
_____ Copy of driver's license(s) and vehicle registration(s) are attached.
_____ No unit may be occupied or used for any commercial or business purpose.
_____ Any and all violations on the property must be cured and all fines paid prior to lease approval.
_____ Only three (3) household, domestic pets are permitted per unit; breed restrictions apply.
_____ At the time of the Lease application (whether is a New Lease or Lease Renewal) the Lot Owner **MUST NOT** be delinquent in the payment of the Association dues and/or have any open and unresolved violations. The account must be brought current before any lease application can be considered for approval by the Association.

APPROVAL REQUIRED – Application, fees and all applicable documentation must be mailed to GRS Community Management at the address indicated above.

A Certificate of Approval is required for Leases.

Please visit ***grsmgt.com > Eastridge Homeowners Association Inc. > Association Documents and Rules & Regulations*** for a comprehensive overview of the Rules and Regulations of the Association.

EASTRIDGE HOMEOWNERS ASSOCIATION, INC.

Lease Application

Please print legibly and complete all the sections.

LEASE BEGIN DATE:	**LEASE END DATE**:

UNIT INFORMATION

PROPERTY ADDRESS	MOVE-IN DATE
CURRENT OWNER NAME	CONTACT #

APPLICANT INFORMATION

APPLICANT NAME	CO-APPLICANT NAME
PRIMARY CONTACT #	PRIMARY CONTACT #
EMAIL	EMAIL
CURRENT MAILING ADDRESS	CURRENT MAILING ADDRESS
CITY-STATE-ZIP	CITY-STATE-ZIP
EMERGENCY CONTACT NAME & TELEPHONE	EMERGENCY CONTACT NAME & TELEPHONE
MARITAL STATUS MARRIED ( ) SINGLE ( )	MARITAL STATUS MARRIED ( ) SINGLE ( )

OTHER APPLICANTS OR OCCUPANTS

NAME	RELATIONSHIP	DOB
NAME	RELATIONSHIP	DOB
NAME	RELATIONSHIP	DOB

REALTOR INFORMATION

REALTOR'S NAME	PHONE #	EMAIL

ADDITIONAL INFORMATION

EMPLOYMENT HISTORY

ARE YOU: Self-Employed? Yes ( ) No ( ) Retired? Yes ( ) No ( )

EMPLOYER	CO-APPLICANT/SPOUSE EMPLOYER
CITY-STATE-ZIP	CITY-STATE-ZIP
PHONE #	PHONE #
EMPLOYED FROM: TO:	EMPLOYED FROM: TO:
DEPARTMENT OR POSITION	DEPARTMENT OR POSITION
SUPERVISOR	SUPERVISOR
MONTHLY INCOME	MONTHLY INCOME

VEHICLE INFORMATION

(Please refer to the Association's Declaration of Covenants, Conditions and Restrictions for Vehicle & Parking Restrictions.)

MAKE	MODEL	COLOR	STATE	TAG #
MAKE	MODEL	COLOR	STATE	TAG #

PET INFORMATION

(Please refer to the Association's Declaration of Covenants and Restrictions)

(Write NONE if no pets)

TYPE	BREED	RABIES LICENSE TAG #	COLOR	WEIGHT
TYPE	BREED	RABVIES LICENSE TAG#	COLOR	WEIGHT
TYPE	BREED	RABIES LICENSE TAG #	COLOR	WEIGHT

AUTHORIZATION FILE DISCLOSURE

APPLICANT/TENANT CONSENT

I hereby consent to allow Verify Screening Solutions, Inc., through its designated agent/employee, to obtain and verify my consumer reports, including but not limited to, my credit report, criminal information, and eviction information for the purpose of determining my eligibility to lease/purchase the condominium or single-family home. I further understand if I lease/purchase a condominium or single-family home, I consent to allow Verify Screening Solution, Inc., and its designated agent/employee, for the duration of my lease, to review the following list of information to assess risk, for analytics, for process improvement and other uses: my consumer reports, including but not limited to my credit report, criminal information, eviction information, my rental payment history and occupancy history, and other information. The facts set forth in my application for residency are true and complete. False, fraudulent, or misleading information on an application may be grounds for denial of residency, or subsequent eviction.

Signature	Date
Printed Name	Date of Birth
Social Security Number	
Driver ' s License Number	State
2nd Applicant’s Signature	Date
Printed Name	Date of Birth
Social Security Number	
Driver' s License Number	State

ADDITIONAL OCCUPANTS OVER 18, AUTHORIZATION FORM IS REQUIRED

3900 Woodlake Blvd., Suite 309, Lake Worth, FL 33463

EASTRIDGE HOMEOWNERS' ASSOCIATION, INC.
PET REGISTRATION

(Please complete one registration form for each pet)

Date: _____ Owner: _____ Tenant: _____

Name of Homeowner(s): _____

Name of Tenant(s): _____

Property Address: _____

Tenant(s) who are applying must attach a current executed copy of your lease agreement, stating specifically Landlord(s) permits pet(s)/animal(s) on the premises.

A. Please indicate type of pet(s)/animal(s), including service animals. Attach a recent picture of your pet(s), taken within the last six (6) months, and accurately show the pet(s)/animal(s) as of the date of this registration.

I. Type of Pet(s): _____ Weight: _____ Color: _____

Breed: _____ Tag Number: _____

II. Veterinarian Reference: (Please attach a current certificate of vaccination/health certified by a licensed veterinarian within the past thirty (30) days.)

Name: _____ Phone No.: _____

Address: _____

B. By submitting this registration application, Resident understands and agrees that the pet(s)/animal(s) is subject to the association's governing documents, including but not limited to association's Declaration and its Rules and Regulations and all state and local laws. Accordingly:

1. Up to three (3) household, domestic pets are permitted per home; breed restrictions apply.

2. When outside the unit, all pet(s)/animal(s) must be on a leash which is attached to the pet/service animal and in direct physical control of a person capable of always controlling such pet and the pet(s)/animal(s) will not be left unattended at any time.

3. Residents agree to register the pet(s)/animal(s) in accordance with local laws and requirements, and to immunize pets in accordance with such local laws and requirements.

4. Residents shall be responsible for any damage created by a pet/animal to association property.

5. The pet(s)/animal(s) will not cause danger, threat to any person or other pet, nuisance, noise, health hazard, or soil the premises, grounds, common areas, walks, parking, landscaping, or gardens. Resident agrees to clean up after the pet(s)/animal(s) and agrees to accept full responsibility and liability for any damage, injury or action arising from or caused by his/her pet(s)/animal(s). Residents agree that if their pet/animal becomes annoying, bothersome, or in any way a nuisance or disturbance to other Residents or to the operation of the association, the Resident will immediately, upon notice from association remove the offending pet/animal from the premises.

6. Resident warrants that the pet(s)/animal(s) have no history of causing physical harm to persons or property, such as attacking, biting, scratching, chewing, etc. and further warrants that the pet(s)/animal(s) have no vicious history or tendencies.

7. Residents understand and agree that each year the pet/animal is kept on the property; a valid certification from a licensed veterinarian shall be submitted to the association showing that the pet/animal has current vaccinations.

8. The Resident acknowledges in writing that Resident will comply with the guidelines established by the association regarding pets.

9. If Resident fails to comply with these requirements by failing to have his/her pet(s)/animal(s) registered (this shall include but not limited to replacement pets) and approved in advance or has a pet on the property or premises without approval and is later discovered, (whether the pet belongs to Resident or another), then the association shall have the right to remove such pet/animal immediately without notice. If any action is necessary to remove the animal, the prevailing party shall be entitled to its reasonable attorney's fees and costs, if any.

10. The pet/animal shall not be deemed approved until the Resident receives a written confirmation from the association approving same.

11. If any action is necessary to require compliance with this agreement, the prevailing party shall be entitled to its reasonable attorney's fees and costs, if any.

C. Association and Resident agree, notwithstanding initial compliance with the pet registration, should the Resident receive written notice from Association that a pet/animal is deemed undesirable, for whatever reason, Resident shall forthwith remove the undesirable pet/animal from the premises. Any failure to remove the pet/animal after written notice shall be a material breach of this agreement.

D. Disapproved pets/animals shall not be allowed to re-enter the property or the premises.

E. Any approval of a pet given by Association to Resident, prior to or after Resident takes possession of his/her premises, shall be strictly subject to the terms of this agreement/registration, and any such approval given shall require compliance herewith notwithstanding the fact that this addendum may not be resigned after a pet is approved or added.

_____	_____	_____
Print Resident Name	Resident Signature	Date

APPROVED THIS _____DAY OF _____, 20_____.

By: _____ **Title:** _____

Authorized Signature of Eastridge HOA, Inc.

EASTRIDGE HOMEOWNERS ASSOCIATION, INC.

PROSPECTIVE LESSEE ACKNOWLEDGEMENT

The undersigned being a prospective Lessee of the following Lot No.: _____ and Property Address: _____, in **Eastridge Homeowners' Association, Inc.** acknowledges that I/We have read, understand, and agree to follow and abide by all the terms and conditions of the following Documents for the Association.

a. Declaration of Covenants, Conditions and Restrictions
b. Articles of Incorporation
c. By-Laws
d. Rules & Regulations
e. Any and all Amendments to all Association Documents.

Dated: _____ Lessee Signature: _____

Lessee Print Name: _____

Dated: _____ Lessee Signature: _____

Lessee Print Name: _____

Dated: _____ Lessee Signature: _____

Lessee Print Name: _____

EASTRIDGE HOMEOWNERS' ASSOCIATION, INC.

ADDENDUM TO LEASE APPLICATION

THIS ADDENDUM is made between _____("Landlord") and _____ / _____ ("tenant(s)") for Lot _____effective this _____day of _____20 ___and is intended to and shall supplement, amend, and modify that certain Lease dated ____, in the following respects:

1. Tenant(s) is/are subject to and shall abide by Florida Statutes: Assessments: Tenant Occupancy: Where an owner is delinquent in any monetary obligation to the Association, the Association can make a demand for the tenant to pay to the association the future monetary obligations related to the Association unit owed to the Association. The demand must be in writing. If the tenant fails to comply, the Association may have the tenant evicted in accordance with Florida Statutes. The unit owner shall give the tenant credit against rent due to the unit owner for any amounts paid by the tenant to the Association.

2. In the event the landlord/owner becomes delinquent in payment of assessments (regular, general, or special) or other charges to the Association, the Association may notify the tenant. Upon such notification, the tenant shall be obligated to pay the rent required under the lease to the Association, until all delinquent assessments and other charges have been paid in full. During the period of time the tenant is paying the rent to the Association, the landlord shall not seek to evict the tenant for non-payment of rent.

LANDLORD:

_____	_____	_____
Please Print Name	Signature	Date

TENANT:

_____	_____	_____
Please Print Name	Signature	Date

TENANT:

_____	_____	_____
Please Print Name	Signature	Date