

BANYAN SPRINGS P.O.A.
c/o Seacrest Services Inc.
2101 Centrepark West Drive Suite 110
West Palm Beach, FL 33409
(561) 697-4990 - (Fax) (561) 712-8332

GUIDELINES FOR RESALES PATIO VILLAS ASSOCIATION

1. DIRECTIONS FOR THE PROSPECTIVE SELLER:
 - A. The unit owner notifies Management of the intention to sell the unit.
 - B. Management supplies the unit owner with an application package which includes instructions for completing the forms and the required fees.
 - C. It is the unit owner's obligation to ensure the completed application gets returned to Management for processing **30 days prior to closing**. Only completed applications will be accepted by Management. The application will not be processed without the necessary fees.

2. DIRECTIONS FOR THE PROSPECTIVE BUYER:
 - A. Complete all application forms. PLEASE PRINT. The information submitted must be legible.
 - B. **ALL OF THE INFORMATION REQUESTED MUST BE FURNISHED. IF THE APPLICATION IS INCOMPLETE FOR ANY REASON IT WILL NOT BE PROCESSED AND WILL BE RETURNED TO THE PROSPECTIVE BUYER.**
 - C. **THE APPLICANT(S) MUST SIGN THE APPLICATION AND ALL AUTHORIZATION FORMS.**
 - D. **A COPY OF THE SALES CONTRACT MUST ACCOMPANY THE APPLICATION**
 - E. **A COPY OF YOUR DRIVERS LICENSE MUST BE INCLUDED**
 - F. The following **non-refundable** processing fees must accompany the application:
 1. **Check for \$500.00 paid by Owner payable to Patio Villas Association.**
 2. **Check for \$75.00 payable to Seacrest Services Inc.
Per Single adult or per married couple – (Non-Refundable)**
 - G. The completed application must be submitted to Management at least **30 days prior** to the desired date of occupancy. The final determination will be made by the Board of Directors of the Association involved. **OCCUPANCY PRIOR TO APPROVAL IS PROHIBITED.**

APPLICATION FOR RE-SALE A UNIT AT BANYAN SPRINGS
PATIO VILLAS

- H. At the time of the Contract of Sale the Seller must turn over to the Buyer copies of all of the Documents of the Banyan Springs Property Owners' Association (including the "Articles of Incorporation", the "Amended and Restated Master Declaration of Covenants and Restrictions", the "By-Laws", and the Rules and Regulations" handbook) and of the Condominium or Homeowners' Association where the unit being sold is located. It is the obligation of the buyer(s) to read those documents. **By signing the application the buyer(s) acknowledge that they have read all of the applicable documents and that they agree to abide by the contents thereof.** Some of the restrictions imposed by the documents are:
1. **Banyan Springs is an "Adult Community" within the meaning of the Federal Fair Housing Act. Therefore, no re-sales will be approved unless at least one person residing in the unit at all times is at least 55 years of age. Proof of age must be attached to this application.**
 2. **Children under the age of 18 are permitted to reside only for periods not to exceed 30 days in total in any one-year.**
 3. **One (1) pet, which may not exceed 20 inches in height and 25 pounds in weight.**
 4. **No commercial vehicles, boats, trailers, R.V.'s, pickup trucks, motorcycles, etc., are permitted on the community premises except where they are used for the transport of personal property (moving in or out, or deliveries).**
 5. **It may be required by the Board for an INTERVIEW prior to approval.**
- I. **It is strongly suggested that the Buyer(s) contact their insurance representative because the Master Policy does not include coverage for:**
- **Floor, wall, and ceiling coverings**
 - **Electrical fixtures**
 - **Appliances**
 - **Air conditioning or heating equipment**
 - **Water heaters and filters**
 - **Built in cabinets and counter tops**
 - **Window treatments, including curtains, drapes, blinds, and hardware**
 - **Replacements for any of the above listed property**
 - **Air conditioning compressors that serve only one unit no matter where located**

APPLICATION FOR RE-SALE A UNIT AT BANYAN SPRINGS
PATIO VILLAS

- A. In making the foregoing application, I represent to the Board of Directors that the purpose for the purchase of a unit at Banyan Springs is:

Permanent Residence _____
Seasonal Residence _____
Investment for Rental/Resale _____
Other (Explain) _____

- B. I have received and carefully read a copy of all of the Documents of the Banyan Springs Property Owners' Association (including the "Articles of Incorporation", the "Amended and Restated Master Declaration of Covenants and Restrictions", the "By-Laws", and the "Rules and Regulations" handbook) and of the Condominium or Homeowners' Association where the unit being purchase is located.

YES ()

NO ()

I hereby agree on behalf of myself and all other persons who may use the unit which I seek to purchase that we will abide by the aforementioned documents and any changes or additions thereto. _____ **Initial**

- C. **IF THIS APPLICATION IS ACCEPTED, I WILL PROVIDE A COPY OF THE DEED WITHIN TEN (10) DAYS AFTER CLOSING.**

- D. I understand that the acceptance of an applicant for purchase of a unit at Banyan Springs is conditioned upon the truth and accuracy of this application, and upon the approval of the Board of Directors. **Occupancy prior to this approval is strictly prohibited.** Any misrepresentation or falsification of information provided in the forms will result in an immediate rejection of the application.

- E. In making the application, I am aware that the decisions of the Banyan Springs associations will be final, and no reason need be given for any action taken by the Board. I agree to be governed by the decisions of the Boards of Directors. If the application is rejected after the investigation has been begun the application fees will not be refunded. _____ **Initial**

APPLICATION FOR RE-SALE A UNIT AT BANYAN SPRINGS

PATIO VILLAS

(Please Print or Type)

SELLER'S NAME _____

ADDRESS _____

PHONE # _____ **EMAIL ADDRESS** _____

APPLICANT _____ **D.O.B.** ___ / ___ / ___ **S.S.#** _____

CO-APPLICANT _____ **D.O.B.** ___ / ___ / ___ **S.S.#** _____

PRESENT ADDRESS _____ **ZIP** _____

PHONE # _____ **EMAIL ADDRESS** _____

LENGTH OF OCCUPANCY _____ **YEARS FROM** _____ **TO** _____

PREVIOUS ADDRESS _____ **ZIP** _____

LENGTH OF OCCUPANCY _____ **YEARS FROM** _____ **TO** _____

LANDLORD/MORTGAGE CO. _____

ADDRESS _____ **PHONE #** _____

MORTGAGE # _____

HAVE YOU OR YOUR CO-APPLICANT EVER BEEN EVICTED? _____

IF YES, DESCRIBE WHERE AND WHY _____

HOW MANY PEOPLE WILL BE LIVING IN THIS UNIT _____

APPLICATION FOR RE-SALE A UNIT AT BANYAN SPRINGS

PATIO VILLAS

(Please Print or Type)

APPLICANT'S EMPLOYMENT:

PRESENT EMPLOYER _____ PHONE # _____
ADDRESS _____ ZIP _____
LENGTH OF EMPLOYMENT _____ POSITION _____ MONTHLY INCOME _____

PREVIOUS EMPLOYER _____ PHONE # _____
ADDRESS _____ ZIP _____
MONTHLY INCOME IF RETIRED _____

CO-APPLICANT'S EMPLOYMENT:

PRESENT EMPLOYER _____ PHONE # _____
ADDRESS _____ ZIP _____
LENGTH OF EMPLOYMENT _____ POSITION _____ MONTHLY INCOME _____

PREVIOUS EMPLOYER _____ PHONE # _____
ADDRESS _____ ZIP _____
MONTHLY INCOME IF RETIRED _____

PERSONAL REFERENCES:

NAME _____ PHONE # _____

ADDRESS _____

RELATIONSHIP _____ HOW LONG KNOWN _____

NAME _____ PHONE # _____

ADDRESS _____

RELATIONSHIP _____ HOW LONG KNOWN _____

EMERGENCY CONTACT INFORMATION

1. EMERGENCY CONTACT _____

RELATIONSHIP _____ PHONE # _____

2. EMERGENCY CONTACT _____

RELATIONSHIP _____ PHONE # _____

APPLICATION FOR RE-SALE A UNIT AT BANYAN SPRINGS
PATIO VILLAS
(Please Print or Type)

BANK INFORMATION: (PLEASE FILL OUT COMPLETELY)

NAME OF BANK: _____

ADDRESS _____

PHONE # _____ AGE OF ACCOUNT _____

SAVINGS ACCOUNT # _____ CHECKING ACCOUNT # _____

NAME OF BANK: _____

ADDRESS _____

PHONE # _____ AGE OF ACCOUNT _____

SAVINGS ACCOUNT # _____ CHECKING ACCOUNT # _____

DRIVER LICENSE INFORMATION:

APPLICANT'S DRIVERS LIC. # _____ STATE _____ EXP. DATE _____

CO-APPLICANT'S DRIVERS LIC. # _____ STATE _____ EXP. DATE _____

VEHICLE INFORMATION:

1. MAKE _____ MODEL _____ YR _____ PLATE# _____ STATE _____

(Check mark what type of vehicle) _____ CAR _____ SUV

2. MAKE _____ MODEL _____ YR _____ PLATE# _____ STATE _____

(Check mark what type of vehicle) _____ CAR _____ SUV

NO COMMERCIAL VEHICLES, BOATS, TRAILERS, RV'S, PICK-UP TRUCKS, MOTOR CYCLES, JEEPS, 4 WHEEL DRIVE VEHICLES, VANS, MO-PEDS, ETC. ARE PERMITTED ON THE COMMUNITY PREMISES.

APPLICATION FOR RE-SALE A UNIT AT BANYAN SPRINGS

PATIO VILLAS

(Please Print or Type)

The rules and regulations of **PATIO VILLAS** provide an obligation of unit owners that apartment units are for single family residence. The name and relationship of all other persons who will be occupying the apartment unit regularly are:

Name	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total number of children in my/our family _____

Age (s) _____ / _____ / _____ / _____

Number of children who will be living with me/us: _____

Age (s) _____ / _____ / _____ / _____

We understand that any violation of the terms, provisions, conditions and covenants of **PATIO VILLAS** documents provides cause for available immediate action as therein provided or termination of a leasehold under appropriate circumstances.

DATED: _____

Applicant

Co-Applicant

**APPLICATION FOR RE-SALE A UNIT AT BANYAN SPRINGS
PATIO VILLAS**

**AUTHORIZATION TO RELEASE CREDIT, RESIDENCE, BANKING AND
EMPLOYMENT INFORMATION**

You are authorized to release any information regarding my banking credit, employment, and residence to the credit checking company. I also authorize the credit checking company to obtain a consumer credit report. I waive all rights and privileges concerning the release of said information and reports to the credit checking company.

PRINT NAME _____

SIGNED _____ DATE _____
(APPLICANT)

PRINT NAME _____

SIGNED _____ DATE _____
(CO-APPLICANT)

PLEASE REVIEW THE APPLICATION AND THE RELATED FORMS BEFORE SUBMITTING THEM FOR APPROVAL. WILLFUL MISREPRESENTATION WILL VOID CONTRACT OR AGREEMENT ENTERED INTO IN CONNECTION WITH THIS APPLICATION.

I declare that the information contained in these applications to be true and correct. I authorize the appropriate association to verify the information and to obtain a credit report.

SIGNED _____ DATE _____
(APPLICANT)

SIGNED _____ DATE _____
(CO-APPLICANT)

AFFIDAVIT AND AGREEMENT

Before me this _____ day of _____, 20____, personally appeared first duly sworn, upon oath deposes and says:

1. This Affidavit is based upon Affiants' personal knowledge of the facts, acknowledgements and agreements set forth herein.
2. Affiants are the named Buyers in a contract to purchase a parcel located within the community operated by Banyan Springs located in Palm Beach County, Florida, and legally described as follows:

The foregoing real property will be hereinafter referred to as the "Property".

3. Affiants acknowledge that the Property is located within a community that qualifies as housing for older persons under the applicable Federal, State, and Local law, and Affiants agree to comply with all age restrictions pertaining to the Property and agree to hold the Property out for occupancy by persons fifty-five (55) years of age and older, to abide by all age restrictions in the documents governing the Property, and acknowledge that this agreement applies to anyone who might occupy the Property, including, but not limited to, Affiants and Affiants family, guests, tenants, employees, agents, licensees or invitees.
4. Affiants agree and acknowledge that this Affidavit is a material representation to the Association which operates the community within the Property is located and that the Association would not grant approval to Affiants acquisition of the Property without this Affidavit.
5. Affiants specifically acknowledge that Affiants waive any rights to occupy the Property as long as Affiants occupancy would violate the age restrictions in the applicable Declaration of Covenants and Restrictions and the stated intentions of this Affidavit, including any rights under all applicable statutes, covenants or common law.

FURTHER AFFIANTS SAYETH NAUGHT.

WITNESSES:

AFFIANT:

WITNESSES:

AFFIANT:

STATE OF _____
COUNTY OF _____

The forgoing instrument was sworn to and subscribed before me this _____ day of _____, 20____ by _____. They are personally known to me or have produced _____ as identification.

Notary Public

My commission expires:

BANYAN SPRINGS PATIO VILLAS ASSOCIATION, INC.

**10780 CEDAR POINT BLVD.
BOYNTON BEACH, FL 33437**

2018-19: HOMEOWNERS INSURANCE POLICY (LAST POLICY EXPIRED _____)

NAME OF INSURED: _____

ADDRESS OF UNIT: _____

THE PATIO VILLAS DOCUMENTS REQUIRE EACH UNIT OWNER TO PURCHASE HOMEOWNER'S INSURANCE IN THE AMOUNT OF "FULL REPLACEMENT VALUE" * OF THE UNIT AND LIABILITY INSURANCE. FAILURE TO PROVIDE THIS INFORMATION COULD RESULT IN FINES AND A LIEN PLACED UPON YOUR UNIT.

TO FULFILL THE DOCUMENT REQUIREMENTS WE ARE REQUIRED TO VERIFY THE CONTINUING INSURANCE COVERAGE FOR YOUR UNIT BASED ON "FRAME" CONSTRUCTION.

PLEASE FURNISH THIS INFORMATION YOURSELF. OR BY HAVING YOUR INSURANCE COMPANY/AGENT SEND A COPY OF THE DECLARATION SHEET TO THE ADDRESS OF THE PATIO VILLAS (SEE ABOVE) OR FAX IT TO #561-734-8870.

THAT DECLARATION SHEET MUST INDICATE 1)CONTACT INFORMATION FOR YOUR INSURANCE COMPANY OR AGENT, 2)NAME OF THE INSURED, 3)ADDRESS OF PROPERTY INSURED, 4)POLICY NUMBER, 5)DATES OF COVERAGE, 6)AMOUNT OF COVERAGE FOR THE "DWELLING ONLY", AND LIABILITY, 7)DEDUCTIBLE FOR "ALL OTHER PERILS" (NON-HURRICANE), 8)DEDUCTIBLE FOR HURRICANE/WINDSTORM, AND 9)INDICATION THAT **COVERAGE IS BASED ON "FRAME" CONSTRUCTION. IN SOME CASES THIS INFORMATION WILL BE SHOWN ON THE FIRST PAGE OF THE DECLARATION; BUT, IF NOT, IT MAY BE NECESSARY FOR THE UNIT OWNER TO SUBMIT MORE THAN ONE PAGE.**

ONLY THE POLICY'S DECLARATION SHEET SHOWING ALL NINE (9) ITEMS AS LISTED ABOVE, WILL BE ACCEPTED.

THANK YOU FOR YOUR COOPERATION

PATIO VILLAS BOARD OF DIRECTORS, ALYCE FOWLER, PRESIDENT:

LARRY BIRN, LIASON

IRWIN RIFKIN, INSURANCE COMMITTEE CHAIRMAN

***In APRIL, 2018 the estimated "full replacement value", based upon frame construction was:**

Arbor -----\$213,500

Banyan -----\$188,900

Cypress -----\$167,700

Dover -----\$215,000

BANYAN SPRINGS PATIO VILLAS, INC.

NOTIFICATION OF CHANGE OF OWNERSHIP FOR HOMEOWNERS' INSURANCE

ADDRESS OF UNIT: _____

FORMER OWNER'S NAME(S): _____

NEW OWNER'S NAME(S): _____

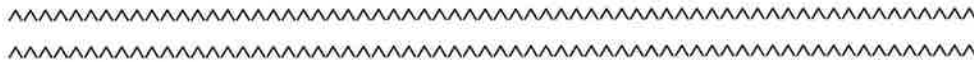
NEW HOME TELEPHONE #: _____

NEW CELL PHONE NUMBER(S): _____

E-MAIL ADDRESS: _____

OTHER ADDRESS: _____

DATE OF CHANGE TO NEW OWNER(S) _____



BANYAN SPRINGS PATIO VILLAS, INC.

NOTIFICATION OF CHANGE OF OWNERSHIP FOR HOMEOWNERS' INSURANCE

ADDRESS OF UNIT: _____

FORMER OWNER'S NAME(S): _____

NEW OWNER'S NAME(S): _____

NEW HOME TELEPHONE #: _____

NEW CELL PHONE NUMBER(S): _____

E-MAIL ADDRESS: _____

OTHER ADDRESS: _____

DATE OF CHANGE TO NEW OWNER(S) _____

PATIO VILLAS ASSOCIATION, INC.
RULES AND REGULATION May 1, 2018

ARCHITECTURAL CONTROL: The Banyan Springs Property Owners Association (BSPOA and the Patio Villas Association Require: An Architectural Modification Form MUST be completed and approved prior to work being done: alterations, changes, additions or modifications to the exterior of a Patio Villa unit including, but not limited to doors, windows, roofs, mailboxes, exterior painting (in approved color), landscaping, painting of walkways and/or carport floors (in approved color). Satellite Dishes are NOT permitted.

The area around Mailbox is to be of Natural Landscape Material ONLY. Natural Landscape is defined as stone, rock, marble chips, brick, pebbles, mulch, flowers, shrubs and the like. No artificial materials or decorative additions. If you install these, the Common Property landscapers are authorized to remove. Plantings must not impede mail delivery or landscaping services.

Concrete Sidewalks are to be of natural color. Replacement or modification requires Architectural Form.

The space between the carport or garage and the unit may be paved with concrete, non permanent pavers, or natural landscape materials.

Doors: There are three types of doors permitted: Solid 6 panel doors - metal or fiberglass, full or half glass with/without grids. Architectural Committee Approvals Required. Doors must be hurricane rated.

Rear Patios: The following 5 parameters must be met by a Villa owner requesting Architectural Committee approval of a patio extension: a) Any extension must be of a temporary installation format and be quickly and neatly and removed if necessary.

- b) Any installation must provide sufficient access to allow continued free passage of the maintenance and landscaping equipment. No block offs.
- c) Measurements of any installation must not exceed six feet out from the existing exterior of the concrete slab/lanai/patio or extend beyond the width of the Villa.
- d) The materials must be removable pavers. The color of the pavers must be in keeping with the color scheme of the Villas subject to Board approval.

Within the three foot (3') area from the permanent structure of your Villa (Considered your Personal Landscaping Areas) any landscaping is to be esthetically and pleasing to the eye and meet the cultural norms of the Patio Villas Community approval. The use of flowers, shrubs and plants should be utilized. Excessive, overly colorful or high ornamentation (over 3 feet tall) will not be approved. When in doubt, submit your plan to the Architectural Committee prior to installation.

A single focal point installation may be installed outside of these parameters. Submit your plan to the Architectural Committee on the Architectural form for approval.

Should your ornamentation be found non-compliant you will be given 30 days notice to remove these items.

POA COMMON PROPERTY: No plantings are to installed outside the 3 foot area of your Personal Landscaping Area without express permission of the Architectural Committee via the Architectural Form. This is considered POA Common Property and as such must have the express written permission of both Patio Villas Landscaping Committee, as well as the POA Architectural Committee and POA Landscaping Committee BEFORE installation.

At no time will artificial, non landscaping materials of any kind be permitted on POA Common Property which would include statues, permanent structures, benches, garden ornaments, gnomes and the like. If these are present, remove them promptly. When these are found they will be removed. Once you are notified you have received approval to plant, utilizing natural landscaping materials, please remember it will be your continued responsibility to maintain the plants.

Awnings are not permitted. Architectural Committee must approve plans for any exception.

FAMILY & GUESTS: Prior to family and/or guests using a villa when the owner is not IN RESIDENCE, the Patio Villas Board must be notified in writing by owner, and a rental application must be completed and submitted to the Management Company and the Patio Villas. Forms are available at the Office.

RENTAL: Rentals are permitted for a MINIMUM of 3 consecutive months within any calendar year but only after necessary application has been completed and approved by Patio Villas Board and all appropriate notifications and taxes have been paid by the owner.

IF THERE IS ANY CHANGE IN OWNERSHIP, FROM THE DATE OF TRANSFER OF OWNERSHIP, A UNIT MAY NOT BE RENTED OUT FOR A PERIOD OF TWO YEARS.

INSURANCE: All Patio Villas must be covered by homeowner's insurance for "Full Replacement Value" and "Liability" and must be based on **FRAME CONSTRUCTION**. Such insurance shall include coverage for the major risk categories in our geographical area; including, but not limited to: fire, windstorm, hurricane, etc. A copy of the insurance policy's Declaration Sheet is to be furnished to the Patio Villas Insurance Committee when it is obtained, renewed or changed. This is a serious matter. Property must be insured properly.

PARKING: Overnight parking is prohibited on all streets of Patio Villas. Street parking is permitted at all other times provided the vehicle does not obstruct the free flow OF TRAFFIC OR BLOCK DRIVEWAYS OR SIDEWALKS. There shall be no parking on the grass at any time. All traffic signs must be obeyed. Where one way traffic is directed the Rule must be followed.

VEHICLES: No motorcycles, recreational vehicles, trailers, RVs, boats, or commercial vehicles are permitted to be parked/housed by the Unit owner. This does not prohibit workmen vehicles doing work for owners.

PETS: Only one dog, cat or bird is permitted per unit. Dogs must not exceed 20" in height and 25 pounds in weight. All persons who walk a pet are required to clean up after the pet; and all pets must be on a leash. Those owners in violation will be fined.

Emotional support or service animals must have updated vaccination records and wear identification (vest) as to their role when outside of your personal property. Documentation of their role must be submitted to the Patio Villas' Board when applying for exception to PET rules. Physician documentation must be submitted.

SAFETY: In the interest of safety, as well as consideration for your neighbors, it is REQUIRED that every Villa owner keep all entryway lights "on" FROM DUSK TO DAWN, whether or not the owner is in residence. Entry lights are defined as those lights adjacent to front door, side door, carport light, garage door. To increase safety, owners are encouraged but not required to keep back lights on.

TRASH AND RECYCLING STORAGE: Trash and recycling containers must be stored in the carport area, garage or in an area screened from the street. Trash, recyclables, etc. may not be put out before 5pm of the day preceding the scheduled collection. Plastic or paper bags must be securely placed in containers, not left on the street. Containers must be re-stored by 12pm the day of collection.

GARAGE DOORS are to remain closed except when being used for exit/entry or for servicing purposes.

CARPORTS are not to be used for excessive storage. Storage should be in closed containers or bins.

WILDLIFE: The feeding of wild animals, feral cats, ducks, birds, etc., is strictly prohibited. (FL statute).

WEAPONS: No weapons are permitted at any Patio Villas Meeting or Event.

SIGNED: _____ Board Initials

DATE: _____



Innovative Custom Solutions ... Since 1994

INFORMATION RELEASE FORM

DATE: _____

ACCOUNT NAME: _____

SEND TO: ResidentCheck _____

FAX #: 800-495-4842 _____

ABOVE FOR OFFICE USE ONLY

BACKGROUND INFORMATION RELEASE

Applicant: Please fill out all the Information accurately and legibly. PLEASE PRINT.

FULL LEGAL NAME: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ COUNTY: _____

DATE OF BIRTH: ____ - ____ - ____ SS NUMBER: ____ - ____ - ____

DRIVERS LICENSE: _____ STATE: _____

PREVIOUS ADDRESS: _____ HOW LONG?: _____

LANDLORD NAME: _____ PHONE: _____ FAX: _____

PREVIOUS ADDRESS: _____ HOW LONG?: _____

LANDLORD NAME: _____ PHONE: _____ FAX: _____

By signing below, I am stating that the information I have provided in this Application is true, correct and complete. All persons and firms named in this Application may freely give any information concerning me that is requested, and I waive all rights of action that I may have for any consequence resulting from such information. By signing below I hereby authorize any employer, law enforcement agency, administrator, federal, state or city agency, consumer reporting agency, or institution to release information to Secrest Management. I voluntarily waive all rights of recourse and release all of the above from liability for compliance with this authorization.

SIGNED: _____

DATE: _____



Innovative Custom Solutions ... Since 1994

INFORMATION RELEASE FORM

DATE: _____

ACCOUNT NAME: _____

SEND TO: ResidentCheck _____

FAX #: 800-495-4842 _____

ABOVE FOR OFFICE USE ONLY

BACKGROUND INFORMATION RELEASE

Applicant: Please fill out all the information accurately and legibly. PLEASE PRINT.

FULL LEGAL NAME: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ COUNTY: _____

DATE OF BIRTH: ____ - ____ - ____ SS NUMBER: ____ - ____ - ____

DRIVERS LICENSE: _____ STATE: _____

PREVIOUS ADDRESS: _____ HOW LONG?: _____

LANDLORD NAME: _____ PHONE: _____ FAX: _____

PREVIOUS ADDRESS: _____ HOW LONG?: _____

LANDLORD NAME: _____ PHONE: _____ FAX: _____

By signing below, I am stating that the information I have provided in this Application is true, correct and complete. All persons and firms named in this Application may freely give any information concerning me that is requested, and I waive all rights of action that I may have for any consequence resulting from such information. By signing below I hereby authorize any employer, law enforcement agency, administrator, federal, state or city agency; consumer reporting agency, or institution to release information to Seacrest Management. I voluntarily waive all rights of recourse and release all of the above from liability for compliance with this authorization.

SIGNED: _____

DATE: _____