

## Brentwood Manors Phase II Homeowners Association

PO Box 190206 Sunrise, Florida 33319 Telephone: 954-746-9415

Email: <u>brentwoodp2@gmail.com</u>
Website: <u>www.brentwoodmanorsp2.com</u>

## PROSPECTIVE BUYER'S APPLICATION FOR PURCHASE APPROVAL DEED RESTRICTED DEVELOPMENT (NO RENTING OF UNIT IS ALLOWED) Will this be your primary resident? Yes No

There is a \$200.00 non-refundable application fee to cover the cost of a comprehensive background check and review of the application, and an additional non-refundable \$100.00 fee for background check for any person over the age of 17 years that will be residing at this address for three months or more. Make payment(s) payable to Brentwood Manors HOA and mail to the address above.

Applicant Information												
Name:												
Cell pho	ne #:			Home phone:		Email:						
Current address:												
City:				State:	,	ZIP Code:						
Own	Rent	(Please circle)	Monthly	y payment or rent:		How long?						
Previous address:												
City: State:					ZIP Code:							
Owned	Rented	(Please circle)	Monthly	y payment or rent:	How long?							
Employment Information												
Current employer:												
Employer address:					How long?							
Phone:			E	E-mail:		Fax:						
City:			State:			ZIP Code:						
Position	:		Hourly	Salary (Please circle)	An	nual income:						
Emergency Contact												
Name o	f a person	not residing with	/ou:									
Address	ii.											
City:			State:		ZIP Code:	Phone:						
Relationship:												
Co-applicant Information												
Name:												
Cell pho	ne #:			Home phone:		Email:						
Current address:												
City:				State:		ZIP Code:						
Own Rent (Please circle) Monthly			payment or rent:		How long?							
Previous address:												
City:				State:	ZIP Code:							
Owned Rented (Please circle)			-	Monthly payment or rent:		How long?						
				· · · · · · · · · · · · · · · · · · ·		·						

Co-applicant Employment Information													
Current employer:													
Employer address:					How long?	How long?							
Phone:	E-mail:				Fax:	Fax:							
City:	State:			ZIP Code:									
Position:	Hourly Salary (Please circle)			Anr	Annual income:								
Other Relatives That Will Be Living with You Other Than Wife or Husband													
Name		<u> </u>	Age:										
Name	Relationsh					, igo.							
						.0							
Motor Vehicles Own (No vehicle with advertising is allowed to park overnight/daily in the development) Each unit is allowed 2 parking spots immediately in front of your unit.													
MAKE		MODEL		YEAR	· 1	<del>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</del>							
					+								
				71.									
A	ddress	s of The l	Unit You Are	Purchas	sing								
Street Address:			( )										
City:	State:			Zip Code:									
Will You Have A Mortgage:	Yes	No Mor	tgager:										
	By-L	aws & A	rticles of As	sociation	1								
Did you receive a copy of our By-La	w from yo	ur agent?	Yes	3	No	Not Sure							
In accordance with our By-Laws, "The leasing or renting of a Unit is strictly prohibited." The only persons allowed to live in your unit as a primary resident other than the owner or owners are: Spouse, Parents, Grandparents, Children.  Unit owners are prohibited from making any structural or landscaping changes to the outside of the unit without written consent from the Board of Directors. For additional information consult the Association's By-Lays and Covenants.													
There must be no parking on the	grass at a	any time, no	sheds or structu	ire shall be	erected higher	than the fencing							
Acknowledgement	to Abi	de by the	By-Laws a	nd Articl	es of the A	ssociation							
I Purchaser and Co-purchaser have read and understand the guidelines of the Association's By-Laws and Articles of the Association and will comply with all aspects of the documents.													
References													
Name:	Address:												
IVAIIIG.		Addiess.			Phone:								
I/We am/are authorizing, Brentwood employment and criminal backgrour		 Phase II HOA	to verify the info	rmation provi	ded on this form	as to my/our credit,							
Signature of applicant:					Date:	Date:							
Signature of co-applicant:	Date:	Date:											