## ORMOND OCEANSIDE HOMEOWNERS ASSOCIATION, INC. (A CONDOMINIUM)

### Application for LEASING of Unit

NOTE: All lessees/renters/tenants are notified that units are subject to all provisions of the Condominium Documents that include restrictions on occupancy, pets, guests, common area facilities, etc. These restrictions are contained in Condominium Documents and are outlined in the Association Rules and Regulations and Pet Policy. Lessee(s) and renter(s)/tenant(s) should direct questions and concerns to the unit owner or the Board of Directors prior to signing this agreement. Owners are responsible for the occupancy, use and behavior of lessees/renters/tenants and guests in accordance with Rules and Regulations.

To allow consideration by the Board of Directors for approval and occupancy, a complete application must be submitted containing the following:

- Application for Leasing of Unit
- Legally binding lease agreement between the unit owner and lessee(s)
- Completed Pet Policy (if applicable)
- Completed Tenant Application for Screening form for each occupant over 18, along with fees for screening
- \$40 per person, or \$60 per couple with same last name.
- Application Fee of \$100 per person over 18 or \$100 per couple if same last name.

\*All Fees should be made payable to ACAMA and mailed or Delivered to 507 C Herbert Street, Port Orange, FL 32129

To: Board of Directors, Ormone	d Oceanside Homeowners As:	sociation, inc.	
Association, Inc. and certifies that th of approval or denial of the applicati interview prospective lessee(s), rent	e following information is tru on, or termination of the leas er(s)/tenant(s) and require do juire additional information fr	e and correct. Intentional misrep: e and eviction of the tenant. The ocumentation in support of state: om lessee(s), renter(s)/tenant(s)	, Ormond Oceanside Homeowners resentation shall be grounds for revocation Board of Directors reserves the right to ments contained herein. Further, the Board such as criminal history record check, and
l: Unit:			
Owner Name:			
Anticipated Occupancy Date:		Term of Lease:	
II: Lessee(s), Renter(s)/Tenant(s) inf	ormation: Please provide req (No more than 2 p Phone:	uested information below on eac ersons per bedroom during the to Age:	h occupant. erm of the lease)
# 2;	Phone:	Age:	
Relationship of Lessee(s), Renter(s)/ III: Residence history of Lessee(s), R Current address:	enter(s)/Tenant(s):		
Time at current address:	From: To:	Rent: Ow	/n:
Current landlord:		Phone #:	

Landlord #2:		Phone #:
Landlord #2:	To:	
Employment of Lessee(s), Renter(s)/Tenan provide additional employer references that cov	nt(s): (for each Lessee, Renter/Tenant – If ar rers a 5 year period.)	nyone has been employed for less than 5 yea
Lessee, Renter/Tenant #1:		
rrame or employer;		
Address of Employer:		
COTTRECT E130Th		rnone#:
Position:	Dates	of Employment:
Lessee, Renter/Tenant #2:		
ranse of chiprojer,		
riceress er mirprojett		
COMBET PERSON:		rnone#:
Position:	Dates of	of Employment:
Have any of the Applicants declared b	nankmintcu in the nact 2 years?	YesNo
Have any of the Applicants been evict		Yes No No No
Have any of the Applicants had two o	r more late payments in the past year?	Yes No
Have any of the Applicants ever refus	ed to pay rent when due?	YesNo
	use a realtor, clergy or relative)	
Name:		Phone #:
Address:		
Name:		Phone #:
Address:		
Today 6to magazina ana da ana da ana da ana		_
Pets: No more than two (2) pets. (The combi	ination of pets is not to exceed 80 lbs total.	(Sec attached Pet Policy))
Vehicles & Parking: (Please note that there	is only one (1) parking space per unit. No commercial vehicles of any type.	Guest spaces are for guests only!)
Year: Make:	Model	Color
Year: Make: Make: Registration (tag) #:	State:	Color.
Registered Owner:		
Emergency Contact:		
Name:	Ohana i	#:

The undersigned agrees to provide any additional information required by the Board of Directors to approve this application. Further, the lessee(s), renter(s)/tenant(s) understand that the Association may investigate any information provided by the undersigned. In addition, the lessee(s), renter(s)/tenant(s) understands that a full disclosure of pertinent facts must be made to the Association. The undersigned affirms receipt of copies of the Rules and Regulations and the Pet Policy of Ormond Oceanside Homeowners Association, Inc. from the owner and understands that these Rules, Regulations & Policies apply to all owners, lessees, renters/tenants, guests and pets and will abide by them. Failure to do so may cause the Board of Directors to revoke or non-renew the approval of the lease agreement.

Printed Name of Applicant on	Lease Agreement	Signature of Applicant on Lease Agreement / Date				
Printed Name of Applicant on Lease Agreement		Signature of Applicant on Lease Agreement / Date				
Deliver or Mail To:	ATLANTIC COMMUNITY ASSOCIATION M. 507 HERBERT STREET, STE. C PORT ORANGE, FL 32129 386 / 760-7365	ANAGEMENT & ACCOUNTING, INC.				
Fax To:	atlanticcommunitymanagement.com 386 / 756-3454					
Email To:	atlanticcama@gmail.com					
		Received complete package: Approval sent to Board: Approved: Yes No				
		Approved: Yes No Date: BOD signed off:				

# ORMOND OCEANSIDE HOMEOWNERS ASSOCIATION, INC. (A Condominium)

	Applicant's Name (Last, First )		Social Se	curity Number		Date of Birt	h Driv	er's License # & State
_								
PERSONAL	Spouse's full name							· · · · · · · · · · · · · · · · · · ·
	Additional 1 Occupants: 2		-		3		· · · · · · · · · · · · · · · · · · ·	
_					<u> </u>		<u> </u>	
	Current address (chec	k one): 🗆 Own/Mort	gage □R	Rent DOther - 1	Details:			·
ORY	Address	City	·-	State		Zip code	Move in date	Home Phone
RESIDENCE MISTORY	Landlord/Community			Monthly Payment		Apt#	Move out date	Landlord Phone
Ę,	Previous address (chec	k one): 🗆 Own/Mort	tgage 🗆	Rent □Other -	Details:		··	<u> </u>
	Address	City		State		Zip code	Move in date	Home Phone
RES	Landlord/Community	-		Monthly Payment		Apt#	Move out date	Landlord Phone
	Miscellane	ous:				F	or Office Use	Only:
	ve you ever been EVICTEI	from any residence?	□Yes	□No			01_011100 000	<u> </u>
	we you ever been convicted ses the applicant or any o		□Yes	□No.	Unit#_		Тетт О	f Lease
	ive any pending criminal you have any pets?		□Yes □Yes	□No □No			_ Move I	n Date
	Journal Down				Caarmit	ty Deposit \$	Applic	ation Fee \$
Do	<u> </u>							
Do	on signing, the applicant(	s) recognize that an in-	vestigativ	re report may be	prepare	d whereby in	formation is of	otained through
Upo inte livin app auth	on signing, the applicant( rview, credit report, and ng. This application may lication. The applicant(s) norizes the release of any	criminal check. This in be declined as a result appearing below here	ncludes in of any m by author	nformation as to hisrepresentation rize the holder o	prepared your cha or insuf the app	d whereby in aracter, gene fficient infor- lication to in	formation is of ral reputation, mation or as a evestigate the a	otained through credit, and mode of result of an incomple bove mentioned, and
Upo inte livin app auth	on signing, the applicant( rview, credit report, and ng. This application may lication. The applicant(s)	criminal check. This in be declined as a result appearing below here	ncludes in of any m by author	nformation as to hisrepresentation rize the holder o	prepared your cha or insuf the app	d whereby in aracter, gene fficient infor- lication to in	formation is of ral reputation, mation or as a evestigate the a	otained through credit, and mode of result of an incomple bove mentioned, and

This management office does not discriminate against any person based on race, color, religion, sexual orientation, national origin, familial status, or disability.

## ORMOND OCEANSIDE HOMEOWNERS ASSOCIATION, INC LEASE APPLICATION FORM

### INFORMATION RELEASE AUTHORIZATION

To Whom It May Concern:	
The undersigned has applied to lease/rer	nt a unit at Ormond Oceanside Homeowners Association, Inc.
"Atlantic Community Association Manag	pertaining to me / us as a lessee / renter to the following entity, ement & Accounting, Inc." It is my understanding that "Atlantic," rmation requested and subsequently provided to the Board of only,
Thank you.	
Sincerely,	
1 <sup>st</sup> Applicants Signature	1 <sup>st</sup> Applicants Printed Name
Date	
2 <sup>rd</sup> Applicants Signature	2 <sup>nd</sup> Applicants Printed Name
Cata	

#### Ormand Oceanside Condominium Association, Inc.

#### **Pet Policy**

The governing documents of Ormond Oceanside Condominium do not allow pets of any kind. The Board in the past has chosen to allow pets anyway resulting in a need for a pet policy for owners, renters and their guests.

The maximum number of pets per unit is limited to two. This includes all pets and is not limited to just cats and dogs.

The combination of pets is not to exceed 80lbs total.

The breed of the pet is not to be one that is considered vicious such as a Rottweiler, Pit Bull, or Doberman Pincher, nor can the dog have a documented history of violent behavior.

All pets must be on a leash and walked off property. County ordinance requires that pets are to be picked up after.

No exotic animals are permitted. Examples include but are not limited to parrots, monkeys, reptiles, & amphibians. The Board reserves the right to determine if a pet is considered exotic.

No pets may be kept bred or maintained for commercial purposes.

No pet determined to be an annoyance or nuisance to neighbors shall be allowed to remain in the condo.

Any repeat violations of these rules may give the board cause to require the pet to be permanently removed from the condo property at the pet owners expense.

Pets currently residing in the unit shall be grandfathered under prior rules. Those pets must be declared through a "Pet Approval / Declaration".

Any new pets fitting within our established pet policy must submit a "Pet Approval / Declaration" within 14 Days.

The above is intended to be adopted by the Board and at a later date approved by the Owners of Ormond Oceanside Condominium and included in our amendments to the Bylaws.

### Pet Approval / Declaration

Unit Owner:
Renter / Applicant Name:
Address:
Unit #:
List pets with weights, and names as well as attach full body photos of your pets to this form:
Please attach proof of current rabies vaccination for each pet.
I have received the pet policy and agree to abide by the said document.
Signature:
Date:
FOR AN ACKNOWLEDGEMENT IN AN INDIVIDUAL CAPACITY:
STATE OFCOUNTY OF
The foregoing instrument was acknowledged before me thisday of, 20, by
Notary Signature
Personally KnownOR Produced Identification Type of Identification Produced
Association Approval:

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### RULES and REGULATIONS Revised August 2015

- Units are for residential use only.
- Residents shall exercise extreme care about making noises or playing music which may disturb other residents.
- Two pets per unit are allowed. Maximum combined weight of pets is 80lbs. No breed of dog that is considered to be vicious such as a Rotweiller, Pit Bull or Doberman Pinscher are allowed. Pets are to be on a leash and walked off property and picked up after in accordance with city rules. Pets are not to be kept for any commercial purpose or become a nuisance or annoyance to neighbors. Repeated violations may give the Board cause to require the pet to be permanently removed from the Condo property. Please refer to the "Pet Policy."
- 4. Hanging, cleaning, or beating garments, rug, etc., from or on the windows, terraces, or facades of the building is prohibited.
- Trash must be put INSIDE the dumpster.
- 6. No electrical or phone wiring, or television antenna, air conditioning units, or anything that protrudes through the walls or the roof of the building except as authorized by the Board of Directors.
- 7. Nothing is to be left out on walkways such as a chair when not in use.
- 8. No cooking grills are to be used on balconies or on walkways.
- 9. Residents are required to park in their assigned parking space only. Only one (1) parking space per unit. If a resident obtains a written approval to use another residents parking space, it must be turned in to "Atlantic" immediately. The space # and dates of use must be included. Guest parking spots are for guests only!

### Occupant Checklist

1.	Important Numbers / Repairs • If you are renting, please notify owner (or rental agent) ASAP for any repairs needed.
	Owner's phone #:
	Building after hours Emergency #:386/527-9744
	*Atlantic Community Association Management & Accounting, Inc 386 / 760-7365
	***Please notify any Board member of repairs needed in the common areas. *  **They are in Units 103, 204 & 206**
2.	Parking
	<ul> <li>Owners or renters are required to park in their assigned parking space.</li> <li>Owners or renters may obtain written authorization to use another owners assigned parking space. A copy of written authorization must be on file with the Association prior to use of said space.</li> <li>Guest Parking is for guests or workers only.</li> <li>Loading space is to be used to load or unload then move your vehicle to your assigned parking space.</li> </ul>
3.	Trash
	<ul> <li>Trash is picked up on Monday and Thursday in a community trash receptacle behind the building.</li> <li>All items must be placed inside the receptacle. The trash company will not pick up anything outside of the receptacle.</li> <li>All boxes must be broken down before placing them in the receptacle.</li> <li>Please wait and place large items in the receptacle the night before the trash is picked up.</li> </ul>
4.	Exterminator
	<ul> <li>Exterminator schedule is posted on the community bulletin board near the mailboxes. Mainly he comes on the 4<sup>th</sup> Friday of each month between 9-9:30am. If you will not be home the Condo board member is authorized to access the premises for this sole purpose.</li> </ul>

#### 5. Pets

- •All pets must be on a leash and walked off the property. County Ordinance requires that pets are to be picked up after. Pets are not to use common areas as a litter box.
- Any additional questions about pets, please refer to the Pet Policy.
   (See the President if you need a copy.)

#### 6. Common Areas

- All walkways must be free of personal items such as shoes, chairs, Beach items, etc. Beach items must be removed from all common areas upon return from the beach.
- Patio is for our community use.
- Grill is for everyone to use. The key can be found hanging on a hook above the light switch in the laundry room. Please return the grill the way you found it. No personal BBQ grills on balcony.
- 7. Prior to leaving for several days or extended time
  - Remove all items off balcony and pull shutters if you have them.
  - \* Please shut off water and put the breaker (in the electrical panel) for water heater to off position.

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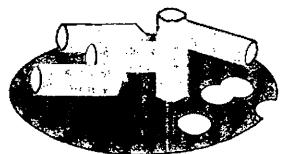
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Address:
Unit #:
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Please attach proof of current rabies vaccination for each pet.
I have received the pet policy and agree to abide by the said document.
Signature:
Date:
FOR AN ACKNOWLEDGEMENT IN AN INDIVIDUAL CAPACITY:
STATE OF
COUNTY OF
The foregoing instrument was acknowledged before me thisday of, 20, by
Notary Signature
Personally Known OR Produced Identification Type of Identification Produced
Association Approval:

## Laundry Room Information



1. Quarters are now available from Cheri. (Unit 206)

- 2. ME detergent is required for this washer to work at optimum level.
- 3. Your detergent can not be left in the laundry room.
- 4. Please clean the lint trap out after every load.
- 5. The dryer sheets (in case you forget), garbage bags, and paper towels are here for use in laundry room or to clean up the common areas.
- 6. After 9/1/15 you will be able to open the new window while doing laundry. Please be sure to close when you are done.