VANGUARD VILLAGE IN THE MAINLANDS COMMUNITY TWO ASSOCIATION, INC. C/O VIP PROPERTY MGMT SPECIALISTS, INC. 2531 ARAGON BLVD. SUNRISE, FL 33322 OFFICE (954) 748-6182

PURCHASE/LEASE APPLICATION

All applicants must receive written approval by the Association's Board of Directors prior to unit occupancy.

Each adult prospective owner/tenant must complete the Association application in full. Applications will be returned unprocessed and/or not approved if any question is left unanswered. Applications and supporting documents must be hand delivered or mailed. We do not accept faxed or e-mailed applications. Double sided applications will not be accepted or processed. Please note that there is a two (2) part application process and both must be completed. The 2 part application process that needs to be completed is the (paper application and online background check through Applycheck).

Applicant(s) must initial each line indicating the required documentation listed is enclosed.

Application Documents:
Each application must be submitted with the following documents:
Association Application (applications must be originals)
Copy of Sales/Lease Agreement (Must be fully executed)
Copy valid identification card and/or driver's license, vehicle registration and proof of insurance for all vehicles. (Foreign nationals must provide a copy of current VISA and Passport)
Pet Verification Form. The City of Tamarac has a Pit Bull Ordinance which must be followed/adhered to. Must register with the City of Tamarac and provide liability insurance policy of \$1,000,000.00
No rentals for the 1 st two (2) years of ownership. (Limited to once per year)
Online portion of the application is completed.
Fees and Online Application Information
** Each adult individual must go to the following link: http://www.applycheck.com/vip Password is (apply849). Do not use the Applycheck website as this will result in delays and additional fees. Complete the online application for a screening check and pay the \$51.50 fee by credit card. ** The online application is in addition to the paper application package that has to be delivered to our office.

delivered to our office.

Orientation fee is \$100.00 and the check is made payable to VIP Property Mgmt.

Please note that acceptance of the processing fee does not represent or constitute automatic approval for occupancy.

Please mail or deliver the original application to:

Vanguard Village in the Mainlands Community Two Association, Inc. C/O VIP Property Management Specialists, Inc. 2531 Aragon Blvd. Sunrise, FL 33322 **Email for questions** assistant.at.vip@gmail.com **Please all up to 30 days for processing of your application**



- BEFORE YOU BEGIN "Each Applicant Must Apply Individually"
"No One Can Apply For You"

VIP Property Management

(Before you begin note that a valid credit/debit card is required. Please allow 15-20 minutes to complete the online application)



1) Visit: www.applycheck.com/vip/



2) Enter Code: apply849



3) Ready: Begin your online application!



4) Additional Information:

We will contact you by email if we need additional information.

Customer Support: orders@applycheck.com

Identity Theft:

You can be charged with Identity theft if you enter another person's name or social security number, or any other information other than your own on an application. Conviction for identity theft carries with it some potentially hefty penalties. In fact, the identity Theft Penalty Enhancement Act signed into legislation in 2004 established identity theft as a federal crime. The law sets the penalty for identity theft at up to 15 years in prison and paying as much as \$250,000 in fines.

VANGUARD VILLAGE IN THE MAINLANDS COMMUNITY TWO ASSOCIATION, INC

____ SALE OR ____ LEASE

Property Address:	
	Lot #:
Current Property Owner:	
Phone Number:	_ Email:
Applicant Name:	
Phone Number:	Email:
Co-Applicant Name:	
Phone Number:	Email:
What is the relationship of Applicant and (Co-Applicant:
I am currently active in the military:	Yes No
I understand that the Application fee is no	n-refundable: (Initial)
If using a realtor plea	ase provide an email and phone number.
Email:	Phone:

Please place application package in the drop box outside the office of:

VIP Property Management Specialists, Inc. 2531 Aragon Blvd., Sunrise, FL 33322 (954) 748-6182 Email for questions assistant.at.vip@gmail.com We are located in the Aragon Condo Clubhouse

APPLICATION FOR OCCUPANCY

	Today's Date:	Desired Date of Occupancy Unit #:
		Maiden Name:
	Date of Birth:	Social Security #:
		Phone Number:
	Email:	
	Single: Married:	Widowed: Divorced: Separated: (How long)
		cted of a crime: Yes: No: If Yes-Date:
		Charges:
	Have you ever been evice	d: Yes: No: If Yes-Date:
		y be your married spouse, if not an additional application is needed.
		Social Security #:
		Phone Number:
	Email:	
		Vidowed: Divorced: Separated: (How long)
		ted of a crime: Yes: No: If Yes-Date:
	Where convicted:	
	Have you ever been evicte	l: Yes: No: If Yes-Date:
		Applicant and Co-Applicant?
	Number of Adult Occupar	s (18) who will occupy unit: please list their information below:
	Full Name:	Age:
		Age:
		ill occupy unit: please list their information below:
MUST BE COMPLETED		Age: Gender:
£ 2 8		Age: Gender:
		Age: Gender:
		Age: Gender:
	Pet: Yes No	

Note: Complete all questions and fill in all blanks. If any questions are not answered or left blank, this application will be returned and/or not processed. Print or type all information clearly. All information in this application will be verified.

PART 1-RESIDENCE HISTORY-3 Years

(Full Addresses must be provided, unit, city, state, zip code, landlord contact information)

A. Present Address:		Name of Development	
		Lease/Own (Please circle one	
Phone Number:	F	Email:	
* An original notarized	l letter from your m ndicating any viola	ost recent landlord is required tions, residency or payment is	to be submitted
B. Previous Address:		Name of Development	
		Lease/Own (Please circle one)	
Landlord's name and conta	act information:		
		ail:	
C. Previous Address:		Name of Development	
		Lease/Own (Please circle one)	
		,	
		ail:	
]	PART II-EMPLOYMI	ENT HISTORY-2 YEARS Supervisor:	
		State: Zip:	
		How long: Salary \$:	
		Supervisor:	
		State: Zip:	
		How long: Salary \$:	
		Supervisor:	
		State: Zip:	
		How long: Salary \$:	
		Supervisor	

Address:	City:	Sta	ite:	Zip:	
Phone number:	Position:	How long:		Salary \$:	per
	PART III-BANK RE				
A. Bank Name:	Account N		ur digi	its):	
	Phone:				
	Account N				
	Phone:				
PART IV	7-CHARACTER REFERENCI	ES (NO FAMI	ILY M	IDMBERS)	
	Phone number:				
Address:	City:	State	:	Zip:	
	Phone number:				
Address:	City:	State	:	Zip:	
	Phone number:				
	City:				
	otify:City:				
	Phone:				
	City:				
N. 4	VEHICLE INFORM	MATION			
Number of Vehicles:					
Make:					
Model:	Model:				
Year:					
Color:					
License plate:	License	plate:			
mormanon and references. App	the above statements are true and co- dicant acknowledges that false information of occupancy and may be constituted as	fion hereon may o	anotitut	ta amoundo for roi.	of the above
		Dat	e:		
Applicant Signature:		Dat	e:		

VANGUARD VILLAGE IN THE MAINLANDS COMMUNITY TWO ASSOCIATION, INC. PET REGISTRATION FORM

	I HAVE A PET:	YES	NO
Name of Unit Owner or Occupar	nt:		
Address:			Unit #:
Type of pet (Please circle one)	Dog: Cat:		
Pet's Name:		Pet's A	ge:
Pet's Weight:		Pet's License,	/Tag Number:
****************	***********	*********	**************
		Photo of P	et
***********	*******	*******	*********
	urrent weight. (NO	TE: if under on	certificate must include the name of the owner, e year of age, veterinarian must include rds.
I am aware of the Paradise Garde agree to abide by them.	ns 1 Rules & Regul	ations and Res	trictions regarding pets on the property and
Signature		Date	
** I do not have any pets:			Date:
Signate	ure		

Please return form with photo and immunization record with the application.

Vanguard Village In The Mainlands Community Two Association, Inc. C/O VIP Property Management Specialists, Inc 2531 Aragon Blvd. Sunrise, FL 33322

RULE AND REGULATIONS

- Parking of automobiles except upon paved areas is prohibited-<u>NO PARKING ON GRASS.</u> No graveled, blacktopped, or paved parking strips are permitted except as previously approved in writing by the Board.
- 2. No commercial vehicles allowed to be parked on property or at clubhouse after 9:00 P.M. through 6:00 A.M. (City of Tamarac Ordinance as well). Vehicles with commercial lettering can be covered with FITTED, CUSTOM vehicle cover. No tarps.
- 3. Overnight parking at clubhouse requires permit.
- 4. Rental restriction: property may not be rented until two (2) years from purchase date. No residence may be rented more than once in a fiscal year. Intent to rent property must be sent to the Board of Directors (in writing). New tenants must come for orientation.
- Properties are to be kept in safe and attractive condition. Lawns are to be maintained and no
 unsightly objects shall be allowed on property. No plywood-covered windows, debris,
 overgrowth, etc. Season decorations must be removed fifteen (15) days AFTER holiday ends.
- 6. No boats or trailers allowed on property.
- All outdoor modifications (including but not limited to exterior painting) to home requires prior, written approval from the Board of Directors. Paint palette colors for body, trim, shutters, fasica, etc. must be submitted PRIOR to painting.
- 8. Use of clubhouse and pool require key access. Please follow posted pool rules. Pool is open dawn to dusk.
- The City of Tamarac has a Pit Bull ordinance which must be followed and adhered to. Must register with City of Tamarac and provide liability insurance policy of \$1,000,000.00.
- 10. Waste and recycling containers, as well as bulk trash, should be placed no earlier than the evening before pick-up dates. Containers must be stored properly the night of pick-up. Mondays: Garbage & Recycling Thursdays: Garbage/Bulk/Vegetation
- 11. Maintenance fees are due the 1st of the month. A late fee of \$5.00 is charged if payment is not received by the 20th of the month.
- 12. Please follow and abide by the By-laws and Declaration of Restrictions that were provided to you.

VANGUARD VILLAGE IN THE MAINLANDS COMMUNITY TWO ASSOCIATION, INC.

ACKNOWLEDGEMENT OF RULES AND REGULATIONS

I/We	buyer of property address of
	in Vanguard Village in the Mainlands Community Two
Association, Inc. have received, revi Regulations.	iewed and will abide by all the Association documents and Rules &
Signature:	Date:
Signature:	Date:
Signature:	Date:

POOL AREA RULES AND REGULATIONS

- SWIM at your own risk-NO LIFEGUARD on duty!
- No food or drink (other than water) allowed in the pool area. This is a Department of Health order.
- No animals, glass, or metal objects allowed in pool or pool area.
- No diving allowed.
- No running, jumping, horseplay, or ball playing in pool or pool area.
- All persons must shower before entering pool.
- Children under 16 must be accompanied and supervised by an adult.
- No bikes, tricycles, skates, scooters, skateboards or motorized toys in pool area.
- No rafts, floats-except pool noodles allowed in pool or pool area. Young children may use tubes or water wings for safety.
- Guests must be accompanied by homeowner/tenant (limit of 5 guests)
- All persons must wear proper swim apparel in pool, no clothing, bathing suits only!
- Diaper-aged children and diaper dependent adults must wear appropriate swim diapers in addition to their swim wear.
- Children under 10 must be accompanied by an adult to use bathrooms.
- Entrance to pool must be with homeowner's own key. No one is permitted to open gate for another guest.
- Pool entrance key is to be used by either the homeowner <u>OR</u> the renter. Both do not have access to the pool.
- These rules are in place to ensure the safety and enjoyment of all homeowners who wish to use the pool.
- Failure to follow these rules can result in denied access to the pool.

VANGUARD VILLAGE IN THE MAINLANDS COMMUNITY II 6900 NW 77 ST. TAMARAC, FL 33321

ELECTRONIC KEY INFORMATION FORM

Date:	Key Number:	2 nd Key Number:	
Last Name:			
First Name:	7		
Home Address:	-		
Home Telephone #:		Cell Telephone #:	
Spouse's Name:			
LIST ALL PERSONS LI	VING IN THIS HOME WITH Y	OU	
Child #1:			
Child #2:			
Child #3:			
Child #4:			
Other Adult:	Relati	onship:	
Other Adult:	Relati	Relationship:	
mail Address:			