

**GLENBROOK HOMEOWNERS ASSOCIATION**

c/o

**AMERI-TECH PROPERTY MANAGEMENT**

24701 US 19 N. Suite 102

Clearwater FL 33763 (727) 726-8000

**SALES/RENTAL INFORMATION SHEET**

**\$100.00 APPLICATION FEE**

**\*\*NOTE\*\* THIS APPLICATION MUST BE TURNED INTO MANAGEMENT AT LEAST 7 DAYS PRIOR TO CLOSING**

**\*\*NOTE\*\* -THERE IS A TWO-YEAR WAITING PERIOD BEFORE BUYERS CAN RENT OUT THE UNIT**

**All future tenants must fill out this information sheet prior to moving in.**

DATE: \_\_\_\_\_

Sales Application \_\_\_\_\_ Rental Application \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_  
Seller (Landlord) Purchaser (Tenant)

Address: \_\_\_\_\_

Closing Date: \_\_\_\_\_ Rental from \_\_\_\_\_ to \_\_\_\_\_ (copy of lease must be submitted with application)

**Complete Name & Address of Title Company or Attorney Handling the Closing:**

Persons who will occupy the above address are as follows:

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Phone # \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Phone # \_\_\_\_\_

Email Address: \_\_\_\_\_

Vehicle (s) Make \_\_\_\_\_ Tag# \_\_\_\_\_

\_\_\_\_\_ Tag# \_\_\_\_\_

Real Estate Agent (if applicable) \_\_\_\_\_

Purchaser (s) states that he has received a copy of all documents, **By laws and Rules and Regulations** and has read understood and agrees to abide by all the conditions and terms therein. Maintenance Fees, late charges, special assessments, legal fees and application fees having been paid in full or will be paid by closing agent at the time of closing of this sale.

**PLEASE NOTE: Buyer must be provided with:**

1. \_\_\_\_\_ Copies of Homeowner Documents
2. \_\_\_\_\_ Pool key, mailbox key
3. \_\_\_\_\_ Rules and Regulations
4. \_\_\_\_\_ Coupon Maintenance Book

**Please note a few important rules to remember:**

- **All pets must be on a leash and picked up after. There is a dog walk area next to the pump house. Two pets maximum.**
- **No commercial vehicles allowed on the premises. Vehicle must have valid tags and be in operable condition at all times. No parking of wave runners, boats, trailers, etc.**
- **Your maintenance fees are due every month no later than the 15<sup>th</sup>. There will be a \$25.00 late fee assessed after the 15<sup>th</sup>.**
- **Trash must be bagged and placed in a garbage can and put out no earlier than the evening before pickup day.**

**I/We declare without reservation that the above information is true and accurate. I/We have read, understood, and agree to abide by the Association's Rules and Regulations. I/We have also understood and agree to accept the delinquent account collection procedures by the Association.**

Purchaser: \_\_\_\_\_  
(Signature)

Tenant: \_\_\_\_\_  
(Signature)

**Please mail this form back to our office prior to closing.**

**BACKGROUND INFORMATION FORM**

DATE: \_\_\_\_\_

I / We \_\_\_\_\_, prospective tenant(s) / buyer(s) for the property located at \_\_\_\_\_,

Managed By: \_\_\_\_\_ Owned By: \_\_\_\_\_,

Hereby allow TENANT CHECK and or the property owner / manager to inquire into my / our credit file, criminal, and rental history as well as any other personal record, to obtain information for use in processing of this application. I / we understand that on my / our credit file it will appear the TENANT CHECK has made an inquiry. I / we cannot claim any invasion of privacy or any other claim that may arise against TENANT CHECK now or in the future.

**PLEASE PRINT CLEARLY**

<u>INFORMATION:</u>	<u>SPOUSE / ROOMMATE:</u>
SINGLE _____ MARRIED _____	SINGLE _____ MARRIED _____
SOCIAL SECURITY #: _____	SOCIAL SECURITY #: _____
FULL NAME: _____	FULL NAME: _____
DATE OF BIRTH: _____	DATE OF BIRTH: _____
DRIVER LICENSE #: _____	DRIVER LICENSE #: _____
CURRENT ADDRESS: _____ _____ HOW LONG? _____	CURRENT ADDRESS: _____ _____ HOW LONG? _____
LANDLORD & PHONE: _____	LANDLORD & PHONE: _____
PREVIOUS ADDRESS: _____ _____ HOW LONG? _____	PREVIOUS ADDRESS: _____ _____ HOW LONG? _____
EMPLOYER: _____	EMPLOYER: _____
OCCUPATION: _____	OCCUPATION: _____
GROSS MONTHLY INCOME: _____	GROSS MONTHLY INCOME: _____
LENGTH OF EMPLOYMENT: _____	LENGTH OF EMPLOYMENT: _____
WORK PHONE NUMBER: _____	WORK PHONE NUMBER: _____
HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO	HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO
HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO	HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO
SIGNATURE: _____	SIGNATURE: _____
PHONE NUMBER: _____	PHONE NUMBER: _____

**TENANT CHECK HOURS OF OPERATION:**  
 MONDAY - FRIDAY : 9:00 a.m. - 5:30 p.m.  
 SATURDAY : 11:00 a.m. - 4:00p.m.  
 ALL ORDERS RECEIVED AFTER 5:00 p.m. (3:30 p.m. on Sat.) WILL BE PROCESSED THE NEXT BUSINESS DAY

**TENANT CHECK FAX #: (727) 942-6843**

**IF THE WRONG SOCIAL SECURITY NUMBER IS SUBMITTED, A SECOND APPLICATION FEE WILL BE CHARGED TO RE-PULL THE REPORT.**

A CREDIT REPORTING SERVICE PROVIDING CREDIT REPORTS FOR REALTORS / PROPERTY MANAGERS / APARTMENT COMPLEXES / MOBILE HOME PARKS / CONDOMINIUM ASSOCIATIONS / EMPLOYERS