SALERNO AT BAY COLONY CONDOMINIUM ASSN.
8930 BAY COLONY DRIVE
NAPLES, FL 34108
239-596-3676

UNIT #:____

APPLICATION FOR PURCHASE, GIFT, DEVISE OR INHERITANCE APPROVAL

1 - This application, an application for approval, and authorization forms must be completed in detail by each proposed adult occupant, other than husband/wife or parent/dependent child (which is considered one applicant).
2 - If any question is not answered or left blank, this application will be returned, not processed and not approved.
3 - Please attach a copy of the sales contract to this application.
4 - Please attach a non-refundable processing fee of $100.00 to this application, made payable to **SALERNO AT BAY COLONY CONDOMINIUM ASSN** for each applicant, other than husband/wife or parent/dependent child (which is considered one applicant).
- Acceptance of the processing fee does not in any way constitute approval of this transaction.
5 - The completed application must be submitted to the Association office at least 15 days prior to the expected closing date.
6 - All applicants must make themselves available for a personal interview prior to final Board of Directors approval. Occupancy prior to Board of Directors approval is prohibited.
7 - No pet allowed in excess of 25 pounds at maturity.
- No pet allowed in excess of 15 inches in height at maturity (measured at the withers).
- Two pets may be allowed if they meet the size limitations and have board approval.
8 - Use of this unit is for single family residence only. No corporation, company, or partnership may purchase a unit. A Trust purchase will be allowed as long as only one family is specified as the occupant.
9 - No commercial vehicles, trucks, boats, trailers, motor homes, mobile homes, campers, recreational vehicles, motorcycles, mopeds, etc. permitted to park on the premises overnight.
- Only 2 assigned parking spaces available per unit.
10 - The seller (current owner) must provide the purchaser with a copy of all Association Documents and Rules & Regulations otherwise, you must purchase them from the Association for $50.00.
11 - Purchaser must notify the Association office with the exact date of their closing.
12 - Occupancy regulations: No more than two (2) occupants per bedroom.
13 - Moving of furniture in or out of a unit is not permitted on Saturday, Sunday or Holidays. Hours for moving are from 8:00 A.M. to 4:30 P.M., Monday through Friday. Management must be notified 48 hours in advance of a move.

MUST PRINT OR TYPE ALL INFORMATION ON THESE FORMS

Date _____ Unit No. _____ Approx. Closing Date _____

Current Owner's Name _____ Tele. No. _____

Owner's Present Address _____

Name of Realtor Handling Sale _____ Tele. No. _____

NAME of Prospective Purchaser (as Title will appear):

a. _____ b. _____ (Spouse)

MORTGAGE INFORMATION: (If unit will be mortgaged):

Name of Lender _____ Tele. No. _____

Address _____

(Continued on Back)

OTHER PERSONS who will occupy the unit with you:

Name	Age	Relationship / Occupation

Have you ever seasonally resided in Florida before? ____ If yes, please state the name, address and dates of residency:

_____

If retired, please state the company's name and address retired from and when retired: _____

_____

Have you ever been convicted or pled to a crime? ____ If yes, please state the date(s), charge(s) and disposition(s):

_____

1. In making the foregoing application, I represent to the Board of Directors that the purpose for the Purchase of a unit at **SALERNO AT BAY COLONY CONDOMINIUM** is as follows:

   Permanent Residence ____ Seasonal Residence ____ Other (Explain) _____

2. I hereby agree for myself and on behalf of all persons who may use the unit which I seek to purchase that I will abide by all of the restrictions contained in the Bylaws, Rules and Regulations, Association Documents, and restrictions which are or may in the future be imposed by the **SALERNO AT BAY COLONY CONDOMINIUM ASSN.**

3. I have received a copy of all Association Documents: Yes ____ No ____
   I have received a copy of the Rules & Regulations: Yes ____ No ____

4. I understand that I will be advised by the Board of Directors of either acceptance or denial of this application. Occupancy prior to Board of Directors approval is prohibited.

5. If this application is accepted, I will provide the Association with a copy of the Closing Statement and a copy of the recorded Deed within 30 days after closing.

6. I understand that there is a restriction on pets and that I may not have a pet that weighs in excess of 25 pounds at maturity, that is in excess of 15 inches in height (measured at the withers) at maturity and I understand that I may not have more than 1 pet.

7. I understand that the acceptance for purchase of a unit at **SALERNO AT BAY COLONY CONDOMINIUM** is conditioned in part upon the truth and accuracy of this application and upon the approval of the Board of Directors. Any misrepresentation, falsification or omission of information on these forms will result in the automatic disqualification of my application. Occupancy prior to Board of Directors approval is prohibited.

8. I understand that the Board of Directors of **SALERNO AT BAY COLONY CONDOMINIUM ASSN.** may cause to be instituted an investigation of my background as the Board may deem necessary. Accordingly, I specifically authorize the Board of Directors, Management and RENTERS REFERENCE OF FLORIDA, INC. to make such investigation and agree that the information contained in this and the attached application may be used in such investigation, and that the Board of Directors, Officers and Management of the **SALERNO AT BAY COLONY CONDOMINIUM ASSN** itself shall be held harmless from any action or claim by me in connection with the use of the information contained herein or any investigation conducted by the Board of Directors.

In making the foregoing application, I am aware that the decision of the **SALERNO AT BAY COLONY CONDOMINIUM ASSN** will be final and no reason will be given for any action taken by the Board of Directors. I agree to be governed by the determination of the Board of Directors.

APPLICANT _____ APPLICANT _____

INSTRUCTIONS:

1 -All applicants are processed as separate investigations.
2 -Print legibly or type all information. Account and telephone numbers and complete addresses are required.
3 -If any question is not answered or left blank, this application may be returned, not processed or not approved.
4 -Missing information will cause delays in processing your application.
5 -Any misrepresentation, falsification or omission of information may result in your disqualification.
6- Only the applicants are authorized to sign all forms on page 2.

APPLICATION FOR OCCUPANCY/APPROVAL

PRINT OR TYPE (Use Black Ink)

Purchase_____ or Lease _____ (How long)

Apt. No. _____ Bldg No._____ Special Address or Unit _____

Date_____ 20_____ Desired date of occupancy _____

Applicant #1 (Mr./Mrs. /Ms.)_____ Date of Birth_____ (mm/dd/yy) Soc. Sec No. _____ (Alien, Green Card, Social Insurance No.)

Applicant #2 (Mr./Mrs./Ms.) _____ Date of Birth_____ (mm/dd/yy) Soc. Sec No. _____ (Alien, Green Card, Social Insurance No.)

Email Address: _____ Maiden Name_____

Number of expected occupants. (Over age 18) _____ (Under 18) _____

Names & ages of children who will occupy: _____

Description of Pets (Breed, Size, Color, Weight, Etc.)_____

In case of emergency notify: _____
Name *Address* *Telephone*

PRINT OR TYPE (Use Black Ink)

RESIDENCE HISTORY

A. Present Address _____ (Street Address, Apt No., City, State, Zip) Phone (___) _____

Name of Apt. /Condo_____ Phone (___) _____ Dates of Residency_____

Name of Landlord or Mortgage Co. _____ Phone (___) _____

Landlord Email Address: _____

Address _____ Mtg. No. _____

B. Previous Address _____ (Street Address, Apt No., City, State, Zip) Your Apt No. _____

Name of Apt. /Condo_____ Phone (___) _____ Dates of Residency_____

Name of Landlord or Mortgage Co. _____ Phone (___) _____

Landlord Email Address: _____

Address _____ Mtg. No. _____

C. Prior Address _____ (Street Address, Apt No., City, State, Zip) Your Apt No. _____

Name of Apt. /Condo_____ Phone (___) _____ Dates of Residency_____

Name of Landlord or Mortgage Co. _____ Phone (___)_____

Address _____ Mtg. No. _____

Landlord Email Address: _____

(Continued on Back)

PRINT OR TYPE (Use Black Ink)

EMPLOYMENT REFERENCES

A. Applicant #1
Employed By (Business Name) _____ Phone (___) _____
(or retired from)

How long_____ Dept. or Position _____ Mo. Income _____

Address _____ Zip _____

B. Applicant #2
Employed by (Business Name) _____ Phone (___) _____
(or retired from)

How long_____ Dept. or Position _____ Mo. Income _____

Address _____ Zip _____

INTERNATIONAL APPLICANTS ONLY

Mother's Full Name, including Maiden Name (Applicant #1) _____

Mother's Full Name, including Maiden Name (Applicant #2) _____

(Continued on Back)

PRINT OR TYPE (Use Black Ink)

BANK REFERENCES

C. Bank Reference _____ Phone (___) _____

How long_____ Ck. Acct. No. _____ Sav. Acct. No. _____

Address _____ Zip _____

D. Bank Reference _____ Phone (___) _____

How long_____ Ck. Acct. No. _____ Sav. Acct. No. _____

Address _____ Zip _____

CHARACTER REFERENCES

1. _____
Name *Address* *Phone (Residential & Office)*
Email Address: _____

2. _____
Name *Address* *Phone (Residential & Office)*
Email Address: _____

3. _____
Name *Address* *Phone (Residential & Office)*
Email Address: _____

VEHICLE INFORMATION

Driver's License. No. #1 _____ #2 _____ State_____

Make_____ Model _____ Year _____ Plate No._____ Color _____ State_____

Make_____ Model _____ Year _____ Plate No._____ Color _____ State_____

If this application is NOT legible or is not completely and accurately filled out, Applicant Information (and the Association) will not be liable or responsible for any inaccurate information in the investigation and related report (to the Association) caused by such omissions or illegibility. By signing, the applicant recognizes that the Association or their agent, Applicant Information, may investigate the information supplied by the applicant and a full disclosure of pertinent facts may be made to the Association. The investigation may be made of the applicant's character, general reputation, personal characteristics, credit standing, criminal background and mode of living as applicable. I may request, in writing, within a reasonable time, a complete and accurate disclosure of the nature and scope of any investigation.

Signature_____ Signature _____
Applicant #1 Applicant #2

Date _____ Date _____

APPLICANT(S): Most banks, financial institutions, mortgage companies and employers require your signature and name printed. Make sure Authorization Form is completed as indicated.

DISCLOSURE AND AUTHORIZATION

[IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING ACKNOWLEDGMENT]

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

_____ ("the Company") may obtain information about you from a consumer reporting agency for tenant screening purposes. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your criminal history, social security trace, employment and education references, credit history, professional licenses and credentials. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for residency is an investigation into your rental performance history conducted by Applicant Information, 2525 Hollywood Blvd; Hollywood, Florida 33020, Phone: 800-315-8606, Fax: 866-741-3258, or another outside organization. This Disclosure and Authorization allows the Company to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if approved for residency, throughout the course of your tenancy to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

California applicants or employees only: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law. ☐
New York applicants or employees only: You have the right to inspect and receive a copy of any investigative consumer report requested by Employer by contacting the consumer reporting agency identified above directly. You may also contact the Company to request the name, address and telephone number of the nearest unit of the consumer reporting agency designated to handle inquiries, which the Company shall provide within 5 days.
New York applicants or employees only: By signing below, you also acknowledge receipt of Article 23-A of the New York Correction Law
Washington State applicants or employees only: You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.
Massachusetts, Minnesota and Oklahoma applicants or employees only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company. ☐

Printed Name: _____

Signature: _____ **Date:** _____

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" at any time after receipt of this authorization and, if I am approved for residency, throughout my tenancy. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by Applicant Information, 2525 Hollywood Blvd; Hollywood, Florida 33020, Phone 800-315-8606, Fax 866-741-3258, another outside organization acting on behalf of the Company, and/or the Company itself. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

I understand that by signing and documenting the date below:

- I am authorizing Applicant Information to conduct the background check(s) described above
- I am consenting to and have read and understand the above disclosure

Printed Name: _____

Signature: _____ **Date:** _____

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:

    - a person has taken adverse action against you because of information in your credit report;
    - you are the victim of identity theft and place a fraud alert in your file;
    - your file contains inaccurate information as a result of fraud;
    - you are on public assistance;
    - you are unemployed but expect to apply for employment within 60 days.

    In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer

reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.

- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address form the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).

- The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a "security freeze" on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is

placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
1.a. Banks, savings associations, and credit unions with total assets of over $10 billion and their affiliates b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:	a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552 b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above: a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act. c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations d. Federal Credit Unions	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050 b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480 c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106 d. National Credit Union Administration Office of Consumer Financial Protection (OCFP) Division of Consumer Compliance Policy and Outreach 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
4. Creditors Subject to the Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423
5. Creditors Subject to the Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357