

# Plaza de Flores Condominium Association, Inc.

## APPLICATION TO PURCHASE

An application fee of \$100.00 per applicant 18 years of age or older must accompany this application. Married couples are considered one applicant. A copy of the purchase agreement MUST accompany this application as well as a signed background check form for each person named on the purchase agreement.

Application must be submitted 14 days prior to move in date.

Date submitted: \_\_\_\_\_

### TO: BOARD OF DIRECTORS

I/We intend to purchase Unit number: \_\_\_\_\_. In order to facilitate consideration of my/our application for the purchase of the above designated unit in Plaza de Flores, I/We represent that the following information is factual and true.

I/We will be bound by the Declaration of Condominium, the Bylaws, the Articles of Incorporation and the Rules and Regulations of Plaza de Flores Condominium Association, Inc.

I/We will provide to the Association within 10 days of closing a copy of the recorded deed.

Full name Applicant 1: \_\_\_\_\_ Age: \_\_\_\_\_

Occupation: \_\_\_\_\_

Time in occupation: \_\_\_\_\_ E-mailaddress: \_\_\_\_\_

Primary telephone: \_\_\_\_\_ Secondary telephone: \_\_\_\_\_

Full name Applicant 2: \_\_\_\_\_ Age: \_\_\_\_\_

Occupation: \_\_\_\_\_

Time in occupation: \_\_\_\_\_ E-mailaddress: \_\_\_\_\_

Primary telephone: \_\_\_\_\_ Secondary telephone: \_\_\_\_\_

Full name if applicant is a corporation: \_\_\_\_\_

Full name of corporate designee: \_\_\_\_\_

Title of corporate designee: \_\_\_\_\_ E-mailaddress: \_\_\_\_\_

Primary telephone: \_\_\_\_\_ Secondary telephone: \_\_\_\_\_

Purpose of Corporation \_\_\_\_\_

State of incorporation: \_\_\_\_\_ Date of incorporation: \_\_\_\_\_

Cont.

Full name if applicant is a trust: \_\_\_\_\_

Full name of trustee: \_\_\_\_\_

Full name(s) of beneficiaries: \_\_\_\_\_

Current address of Applicant(s) \_\_\_\_\_

Time at current address: \_\_\_\_\_ Current telephone number: \_\_\_\_\_

Name & address of landlord, if applicable: \_\_\_\_\_

Landlord telephone number: \_\_\_\_\_ Landlord E-mail: \_\_\_\_\_

Prior address: \_\_\_\_\_

Time at prior address \_\_\_\_\_ Prior telephone number: \_\_\_\_\_

Names & addresses of each employer during the three years prior to the date of the application, including dates of employment.

1: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

2: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

3: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

The Rules & Regulations of **PLAZA DE FLORES CONDOMINIUM ASSOCIATION, INC.** (a copy of which is attached) provide that condominium units are for single family residences. Owners acknowledge that units may not be rented for periods of less than 6 months. Tenants occupying their units may not keep pets.

The names and relationships of all persons who will be regularly occupying the unit are:

<u>NAME</u>	<u>RELATIONSHIP</u>	<u>AGE</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total number of children who will be living in my/our unit and ages:

\_\_\_\_\_

Two personal references (local if possible)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

Attached are two(2) letters of reference, which may be from the same or different persons as listed above.

Applicant 1 Social Security Number \_\_\_\_\_ Date of birth \_\_\_\_\_

Applicant 2 Social Security Number \_\_\_\_\_ Date of birth \_\_\_\_\_

Person to be notified in case of emergency:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Make of automobile: \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ Year \_\_\_\_\_

Tag number: \_\_\_\_\_ State: \_\_\_\_\_

Driver' sLicense# \_\_\_\_\_ State: \_\_\_\_\_

**Address/Phone for acceptance or rejection of this application:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

I am/we are aware that any falsification or misrepresentation of the facts in this application will result in its automatic rejection. I/we give you permission to make further inquiry concerning this application, particularly of the references given.

I/we understand that any violation of the terms, provisions, conditions and covenants of Plaza de Flores Condominium Association, Inc. is cause for immediate action as therein provided.

By signing this application, the applicant recognizes that the Association will investigate the applicant's criminal background.

If approved, I/we consent to receive Association communications by electronic delivery (e-mail).

Date: \_\_\_\_\_

Signature Applicant 1: \_\_\_\_\_

Signature Applicant 2: \_\_\_\_\_

\_\_\_\_\_ Approved \_\_\_\_\_ Disapproved

Board Member: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTICE**  
**Smoke Detectors**

Smoke detectors are not connected to the building's fire alarm system. They only alert occupants of a unit to the presence of smoke. The Board of Directors of Plaza de Flores Condominium Association, Inc. hereby gives notice that removing a smoke detector from the walls of a unit and/or removing smoke detector batteries, rendering the smoke detectors inoperable, are fire code violations, and owners are required by the Declaration of Condominium to comply with all laws in the use of their units. Owners are responsible for maintaining functioning smoke detectors and replacing smoke detectors that are malfunctioning. However, the Association will change smoke detector batteries upon request as a courtesy to owners.

**Painted Sprinkler Heads**

The fire sprinklers are connected to the building's fire alarm, and they are activated when they detect temperatures of 155 degrees or more. Also, when activated, the fire department will respond. A painted sprinkler head may not activate properly and, therefore, puts the safety of all occupants of the building at risk.

The Association is responsible for sprinkler head maintenance. To that end, the Board of Directors of Plaza de Flores Condominium Association, Inc., hereby gives notice that painting a sprinkler head is a fire code violation, and owners are required by the Declaration of Condominium to comply with all laws in the use of their units. To be clear, current owners are responsible for ensuring that sprinkler heads are not painted, even inadvertently, and, if they are, the Association will replace the painted heads and bill the owner.

Prospective owners will be given a copy of this notice as part of a purchase application and thereby be made aware that, if they purchase a unit with painted sprinkler heads, it will be their responsibility to replace them. The Association advises prospective owners to ask a home inspector to check for painted sprinkler heads.

Please sign below and return to: Plaza de Flores Condominium Association, Inc., 4202 Central Sarasota Parkway, Sarasota, FL 34238. In the alternative, send an email to [plazadeflores@vahoo.com](mailto:plazadeflores@vahoo.com), acknowledging your receipt of the Smoke Detector & Sprinkler Head Notice.

\_\_\_\_\_

Name

\_\_\_\_\_

Unit#

\_\_\_\_\_

Date

**AUTHORIZATION TO PERFORM BACKGROUND INVESTIGATION AND CRIMINAL REPORT**

Case file#: \_\_\_\_\_ TAGS Special Service-Background Investigative Services.

In compliance with applicable state law, this notice is to inform you that this company may obtain a BACKGROUND PROFILE AND CRIMINAL report in connection with the above noted case.

Reports include but are not limited to criminal background checks, department of motor vehicle records, and associated profile information. An investigative report contains information of your character; general reputation, personal characteristics, or mode of living which has been obtained through public records and personal interviews with neighbors, friends, or associates or from others with whom you are or have been aquatinted or who may have knowledge concerning any such information.

By signing below, I \_\_\_\_\_ authorize this company to obtain a Criminal report or an investigative profile report in connection with my employment, or tenancy as set forth herein.

Print name of applicant

X \_\_\_\_\_ Date: \_\_\_\_\_  
signature of Applicant

SUBLECTS NAME \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

SOCIAL SECURJTY#: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

CLIENT (person or company requesting report): \_\_\_\_\_  
Print Name

\_\_\_\_\_  
Name of Company Signature

PURPOSE OF INVESTIGATION:

Tenancy \_\_\_\_\_ Employment \_\_\_\_\_ Other \_\_\_\_\_



# AUTHORIZATION TO PERFORM AN INTERNATIONAL CRIMINAL BACKGROUND INVESTIGATION

Case file# \_\_\_\_\_ TAGS Special Service - Background Investigative Services.

In compliance with applicable state law, this notice is to inform you that this company may obtain an INTERNATIONAL CRIMINAL BACKGROUND INVESTIGATION report in connection with the above noted case.

Reports include but are not limited to criminal background checks, department of motor vehicle records, and associated profile information. An investigative report contains information of your character; general reputation, personal characteristics, or mode of living which has been obtained through public records and personal interviews with neighbors, friends, or associates or from others with whom you are or have been acquainted or who may have knowledge concerning any such information.

By signing below, I \_\_\_\_\_ authorize this company to obtain a  
Print Name of Applicant

Criminal report or an investigative profile report in connection with my employment, or tenancy as set forth herein.

### NOTE: Each Applicant Must Provide a Copy of Current Passport & ID.

SUBJECTSNAME \_\_\_\_\_

MAIDEN NAME (WOMEN ONLY): \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_

CITY, POSTAL CODE \_\_\_\_\_

COUNTRY OF ORIGIN \_\_\_\_\_

FEIN *ft* SIN or COUNTRY ID# \_\_\_\_\_

PASSPORT NUMBER \_\_\_\_\_

DATE OF BIRTH: MONTH \_\_\_\_\_ / DAY \_\_\_\_\_ YEAR \_\_\_\_\_

CLIENT (person or company requesting report) \_\_\_\_\_  
Print Name of Company

\_\_\_\_\_  
Name of Company

\_\_\_\_\_  
Signature

### PURPOSE OF INVESTIGATION:

Tenancy \_\_\_\_\_ Employment \_\_\_\_\_ Other \_\_\_\_\_

## SEARCH AUTHORIZATION

### I HEREBY CONSENT TO THE SEARCH AND RELEASE OF:

- Criminal Record (Adult)
- Vulnerable Sector Search (IF REQUIRED)
- Additional Searches Listed Below (IF REQUIRED)

### ADDITIONAL SEARCHES

Additionally, I authorize the above named company through International Resources and Tags Special Services - Background Investigative Services to obtain information regarding:

**Consumer Credit Report**- Which relates to me •• S.I.N. # \_\_\_\_\_ (Required for Credit Report & STN Verifications)

**Canadian Searches Only**

**SJN or FEJN Validation** -Relating to me

**SIN or FEIN Verification** - Combining credit and SIN relating to me – (Canadian Searches Only)

**\*Driver's Abstract** - Driver's Record from the Province of: \_\_\_\_\_ (Required For Canadian Searches Only)

**Vendor Verifications-On** behalf of the company \_\_\_\_\_ (Required for Employment Purposes Only)

**Other:** \_\_\_\_\_

**Note: Information is Collected and Disclosed According to Section 29(1) & 32 of the MFIPPA as well as, DPA, PIPA, PIPEDA & PIIDPA.**

### RELEASE AUTHORIZATION AND WAIVER

#### Authorization to Release Clearance Report or Any Police Information

I certify that the information set out by me in this application is true and correct to the best of my ability. I consent to the release of a Criminal Record or any Criminal Information to International resources and Tags Special Services - Background Investigative Services

I hereby release and forever discharge all members and employees of the processing Police Service from any and all actions, claims and demands for damages, loss or injury howsoever arising which may hereafter be sustained by me as a result of the disclosure of information

by the processing Police Service to Tags Special Services - Background Investigative services

Signed this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_.

X \_\_\_\_\_

(Signature of Applicant)

### ORGANIZATION REQUESTING SEARCH

Organization Name: \_\_\_\_\_

**1.\*This Process Is Non-Refundable - A Current Copy Of Your Passport And Driver's License Must Accompany These Forms. Failure To Do So Will Result In The Rejection Of Your Submission Packet. \***

For International Background Check Only

Tags Background Investigative Services  
Florida Agency Number A-9900-343  
(941) 349-1218

CONSENT TO DISCLOSE INFORMATION

PLEASE PRINT (to be completed by applicant)

Surname (please provide names prior to application if applicable)	Name 1	Date of Birth
		Place of Birth I
Maiden Name (if any)	Name 2	Date of Birth
		Place of Birth
Phone	Driver's License No 1 Driver's License No 2	

• Note: please provide previous address if you did not live at above address for more than five years

Number	Street	Apt Unit	City/Providence/county	Postal Code
Number	Street	Apt Unit	City/Providence/county	Postal Code

• Note: Information is collected and disclosed according to Section 29(1) & 32 of the MFIPPA as well as the P.I.P.A. & PIPEOA

<b>RELEASE AUTHORIZATION AND WAIVER</b>  <b>Authorization to release clearance report or any police information:</b> I certify that the information set out by me in this application is true and correct to the best of my ability. I consent to the release of a criminal record or any criminal information to Tags Background Investigative Services. I hereby release and forever discharge all members and employee of the processing Police Service from any and all actions, claims, and demands for damages, loss or injury howsoever arising which may hereafter be sustained by myself as a result of the disclosure of information by the processing Police Service to Tags Background Investigative Services.	<b>SEARCH AUTHORIZATION</b>  I HEREBY CONSENT TO THE SEARCH AND RELEASE OF: A. Criminal Record (Adult) 8 Vulnerable Sector Search (IF REQUIRED) A. Additional Searches Listed Below (IF REQUIRED)  Signed this _____ Day of _____, 20____.  X _____ Signature of Applicant
--	---

<b>ORGANIZATION REQUESTING SEARCH</b> Organization Name: _____ Signature of Representative Witness of ID: _____ Type of ID Provided: _____
--

<b>ADDITIONAL SEARCHES</b> I authorize the above-named company through TAGS Background Investigative Services to obtain information regarding:  ____ Consumer Credit Report - which relates to me ••S.I.N.# _____ (required for credit report & SIN verification only) ____ SIN Validation - Relating to me ____ SIN Verification - combining credit and SIN relating to me ____ Drivers Abstract - * Drivers record from the Providence of _____ ____ Vendor Verification - On behalf of the company _____ ____ Other _____ * Provincial requirements prevail when requesting drivers abstracts. Please speak to Tags Investigative customer service regarding Provincial
---



# ***Plaza de Flores Condominium Association, Inc.***

## **Approved Rules and Regulations**

### **Introduction**

It is the purpose of the Association to maintain a well-appointed but economically, well-managed Condominium Association and community. It is believed that these rules will aid in this purpose. Your Board of Directors will welcome the assistance of all Owners in the enforcement of these Rules and Regulations.

### **Definitions**

"*Common Elements*" are the portion of the Condominium property jointly owned by all Owners. "*Limited Common Elements*" are Common Elements set aside for exclusive use by a Unit Owner.

"*Guest*" is defined as an Owner's friend and acquaintance, not a family member, who will occupy a Unit and register with the office.

"*Visitor*" is defined as an Owner's relative or friend who comes to visit during the day or in the evening.

### **1.General**

1.1 All Unit Owners, tenants and their guests are responsible for compliance with the Association Rules and Regulations as provided therein or amended by the Association's Board.

1.2 Violations of the Rules and Regulations should be reported in writing to the Association's management company/representative in a timely manner.

***No Unit Owner, tenant or guest shall;***

1.3 Permit any loud or objectionable noises.

1.4 Utilize the Common Elements or a Unit's Limited Common Elements in any manner that causes a nuisance or violates any governmental body's laws, ordinances or regulations or jeopardizes the health, safety or welfare of any resident.

1.5 Allow any flammable, combustible or explosive fluids or substances to be kept in any Unit or on the Common Elements. Sarasota County ordinance prohibits the use of grills on lanais. Only electric grills are permitted.

1.6 Obstruct or encumber any walkways, Common Elements or allow bicycles, (except at bike racks) wagons, shopping carts potted plants or similar objects to be left thereon.

- 1.7 Allow any rubbish, refuse, garbage or trash to accumulate in places other than the designated receptacles provided (compactor or recycle bins) or fail to keep any Unit, Common Area or Limited Common Area in a clean and sanitary condition at all times.
- 1.8 Cause anything to be affixed or attached to, displayed or placed on the exterior walls, doors, balconies, patios, carports or windows of the building with the exception of decorative/ornamental wreaths or similar. The Board retains the power, however, at its discretion, to determine if something is unsightly or offensive and, in that case, may ask that the object be removed.
- 1.9 Alter any lock nor install a new lock without the prior written consent of the Board of Directors. When such consent is given, the Unit Owner shall provide the Association with an additional key.

## **2. Guests**

- 2.1 For guests' occupancy while the Owner of the Unit is not present, the Guest Registration Form must be filed with the Association office either personally, via e-mail\_ ([plazadeflores@yahoo.com](mailto:plazadeflores@yahoo.com) ) or fax (941 966-0889) and provide the names of the guests, their car plate number and the arrival and departure dates preferably prior to their arrival. Guests under 18 years old must be accompanied by an adult.
- 2.2 Guests must register their cars and also obtain a parking permit that must be placed and remain visible in the windshield during their stay. Failure to do that may result in their vehicle being towed away at the vehicle owner's expense.
- 2.3 Guests are required to review and sign the Rules and Regulations.
- 2.4 A Unit Owner has the ultimate responsibility of the actions of his/her guest.

## **3. Leases/Rentals**

- 3.1 According to the Declaration of the Condominium, Owners ***may not lease their Units for less than six months at a time.*** A new lease must be created either annually (or every six months, depending upon the lease agreement) and a copy of the lease must be sent to the Association upon each renewal. There are no exceptions as leases cannot be allowed to "roll over" as that presumes a month to month status which is expressly prohibited. Renters must notify the office of moving dates.
- 3.2 Unit Owners are responsible at all times for the conduct of their tenants and it is their responsibility to inform the tenants of the condominium Rules and Regulations.
- 3.3 Any prospective tenant must complete a Plaza de Flores application which must be approved by the Board prior to move in. There is a \$100.00 application fee for a rental.

#### **4. Pets**

- 4.1 Owners are allowed to own or keep one pet. **Tenants and guests are not allowed to have any pets.** Dogs and cats must be under direct control of their owners and on a leash at all times while outside.
- 4.2 Pets shall be limited to one dog or one cat only. Dogs must not exceed 35 pounds in weight and 18 inches at the shoulder.
- 4.3 Pet owners must pick up pet's waste and dispose of it (per city ordinance).
- 4.4 Owners are financially responsible for any damage caused by their pets. The Board may remove from the premises any pet that becomes a nuisance or whose owner fails to comply with pet rules.
- 4.5 No pets are allowed in the pool area, clubhouse or tennis court.

#### **5. Swimming pool/Spa/Tennis Court**

- 5.1 Only Owners, tenants and their guests may use the swimming pool, spa, clubhouse/exerciseroom or tennis courts.
- 5.2 Persons using the pool, spa, clubhouse/exercise room and tennis courts are required to read and obey the posted rules.
- 5.3 No one under the age of 16 is allowed in the pool area unless accompanied by an adult.
- 5.4 There is no glass allowed in the pool area.
- 5.5 The pool, spa, clubhouse/exercise room and tennis court hours of operation are posted. Owners and tenants are not to use outside of stated hours.
- 5.6 The tennis court is to be used to play tennis only.

## **6. Vehicles**

- 6.1 It is mandatory that all Owners and tenants register their cars with the Association office. Each owner of a vehicle will be issued a parking permit decal that must be placed in a visible location at all times while at PDF. Owners and tenants must update their vehicle information with the office.
- 6.2 Unlicensed, unregistered and vehicles unmovable due to mechanical problems will be considered abandoned and may be removed from our property.
- 6.3 No boats, trailers, mobile/motor homes, motorcycles or commercial vehicles shall be permitted to park inside the condominium property. Repairing vehicles on PDF property is prohibited.
- 6.4 Service vehicles are permitted to park during the daytime when they are servicing a Unit or the Common Element.
- 6.5 According to a resolution approved by the Board, each condominium owner is entitled to one covered parking bay and the Board assigned a specific number bay to each Owner.

## **7. Maintenance and Improvement**

- 7.1 Pursuant to Article 8.3 of the Declaration, "no Unit Owner shall make any alteration or improvements to Unit unless they have first obtained approval in writing from the Board of the Association."
- 7.2 Owners requesting approval for an alteration or improvement should complete an application Request for Alteration. Such forms may be obtained from the Association office. Approval of such application is the sole discretion of the board.
- 7.3 All work shall take place between 8:00 am and 5:00 pm, Monday through Friday (exceptions will require Board Member approval).
- 7.4 All construction debris shall be disposed of off-site and the area shall be cleaned daily.
- 7.5 All Unit Owners will have their **dryer vents cleaned annually** by a licensed, insured contractor.
- 7.6 All Unit Owners will have their **air conditioners serviced annually** including, but not limited to: cleaning of condensation line, repair and inspection of all working parts.
- 7.7 When a Unit Owner is to be absent for greater than 5 (five) days, they are to **turn off the water to their Unit**. Contact maintenance if you need assistance.

7.8 When an Owner is to be absent for any extended period of time, the air conditioner must be left on so as to keep the Unit free of humidity and inhibit the growth of mold.

**8. Enforcement**

Pursuant to Article 7.8 of the Declaration of Condominium, the Association may levy reasonable fines against a Unit Owner for failure of the Unit Owner to comply with any provisions of the Declaration, Bylaws or Rules and Regulations after giving reasonable notice and an opportunity for a hearing to the Unit Owner.

I, (print your name) \_\_\_\_\_,  
Have received, read and agree to comply with the Plaza de Flores Rules and Regulations.

YOURSIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_