



# EARMAN VILLAS CONDO ASSOCIATION RENTAL APPLICATION

Neatly complete all information below. All applicants over the age of 18 must complete and sign their own application  
**Non-Refundable Application Fee of \$100 per person**

## PERSONAL INFORMATION

Applicants Full Name \_\_\_\_\_ Phone # \_\_\_\_\_ D.O.B \_\_\_\_\_

Social Security # \_\_\_\_\_ Drivers License # \_\_\_\_\_ State \_\_\_\_\_ Exp. \_\_\_\_\_

Current Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Current Landlords Name \_\_\_\_\_ Landlords Phone # \_\_\_\_\_

How long at this address \_\_\_\_\_ Reason for leaving \_\_\_\_\_

\*\*Previous Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Previous Landlords Name \_\_\_\_\_ Phone # \_\_\_\_\_

How long at this address \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Have you ever been party to an Eviction?  Yes  No

## PETS & CHILDREN

**\*\* No aggressive breeds, 1 pet allowed, Must be Under 20 lbs.**

Number & Type of Pets \_\_\_\_\_

Total number of Children (under the age of 18) \_\_\_\_\_

Children: Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Total number of Adults \_\_\_\_\_

Other Occupants: Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

## VEHICLE INFO

**\*\* No Commercial Vehicles or Trucks**

Auto Yr \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ State/License Plate # \_\_\_\_\_

Auto Yr \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ State/License Plate # \_\_\_\_\_

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**EMPLOYMENT**

Present Employer \_\_\_\_\_ Position \_\_\_\_\_ Mo. Income \_\_\_\_\_

Work Phone # \_\_\_\_\_ How long at job \_\_\_\_\_ Other income/source \_\_\_\_\_

Employers Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

**BANKING**

Name of Bank \_\_\_\_\_ Branch \_\_\_\_\_ Type of Account \_\_\_\_\_

Name of Bank \_\_\_\_\_ Branch \_\_\_\_\_ Type of Account \_\_\_\_\_

**PERSONAL REFERENCES**

Name \_\_\_\_\_ Yrs. Known \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Yrs. Known \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Yrs. Known \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

I CERTIFY that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for tenant screening as may be necessary in arriving at a tenant decision, I understand that the landlord may terminate any rental agreement entered into for any misrepresentations made above.

Signature \_\_\_\_\_ Date \_\_\_\_\_

We, the undersigned, do hereby make application to the Board of Directors of the Earman Villas Condominium Association, Inc. for the approval of a lease between \_\_\_\_\_ (owner) and \_\_\_\_\_ (tenant) for a term commencing with \_\_\_\_\_ and ending on \_\_\_\_\_

It is further understood and agreed that the undersigned applicant for a tenancy (as the lessee) does hereby agree to abide by the rules, regulations and Declaration of Condominium of Earman Villas Association, Inc. in the same manner as a member of the Association. In signing this document, I acknowledge that I have read the condominium Rules and agree to abide them.

Witness: \_\_\_\_\_

Applicant \_\_\_\_\_

Sworn to and subscriber before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

My Commission Expires: \_\_\_\_\_  
Notary Public

Approved: Earman Villas Condominium Association, Inc

By: \_\_\_\_\_

President

**EARMAN VILLAS CONDO ASSOCIATION**  
**www.earmanvillas.com**

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# Earman Villas Condominium Association, Inc.

## ADDENDUM TO LEASE

This ADDENDUM is made between \_\_\_\_\_ ("LANDLORD/ UNIT OWNER") and \_\_\_\_\_ ("TENANT") effective this \_\_\_ day of \_\_\_\_\_ 20\_\_ and is to and shall supplement, amend and modify that certain LEASE dated \_\_\_\_\_ in the following respects:

1. TENANT (S) are subject to and shall abide by all Earman Villas Home Owners Association (referred to as "Association") documents related to the Community.
2. In the event the LANDLORD/ UNIT OWNER becomes delinquent in the payment of Assessments (regular or special) or other charges to the Association for more than Thirty (30) days, the Association shall notify the TENANT in writing with a copy to the LANDLORD/ UNIT OWNER. Upon such notification, the TENANT shall be obligated to pay all future rent payments required under the Lease to the Earman Villas Condominium Association Inc., c/o Accounting Department, Inc., 185 East Indiantown Road, Suite 127, Jupiter FL 334477, until all delinquent assessments and other charges have been paid in full. Once the delinquency has been corrected, the TENANT shall resume paying rent directly to the LANDLORD/ UNIT OWNER. The LANDLORD/ UNIT OWNER may not evict the TENANT FOR non-payment of rent. However, if the TENANT does not pay his rent to the Association as required herein, the Association shall have the right to evict the TENANT. In such an event, the LANDLORD/ UNIT OWNER shall be obligated to reimburse the Association for the costs and attorneys fees incurred by the Association. The Earman Villas Home Owners Association is not the landlord and all problems related to the unit shall be directed and be the responsibility of the LANDLORD/ UNIT OWNER.

### WITNESS

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

### LANDLORD/ UNIT OWNER

By: \_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

### TENANT(S)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name