

MIAMI MANAGEMENT, INC.

IMPORTANT NOTICE

This is to inform you of the procedure to handle applications for Purchase Certificate of Acceptance so you can plan accordingly.

“Application cannot be **“RUSHED”**. Applications must be fully completed and returned with proper fee. If money order or cashiers check is not received with paper work the documents will not be processed.

This application takes some time and follow-up is vital.

PROCESSING BY THE BOARD OF DIRECTORS MAY TAKE 15 TO 20 DAYS.

ESTOPPEL CERTIFICATE:

Section 19.15 of the Association documents states that no owner shall sell or convey its interest in a unit unless all sums due the Association have been paid. The unit owner shall request the estoppel certificate (reflect sums due the Association) at a charge of \$150.00 at least ten (10) working days in advance of the closing. The request for estoppel shall be presented to Miami Management, Inc. in writing along with a check for \$150.00 payable to Miami Management, Inc. Estoppel letters may be faxed only if checks are received in advance.

PUD FORM:

Information form requested by Mortgage or Title Company-Must be requested 10 working days in advance of closing. The request for the pud form must be presented in writing with a \$100.00 check payable to Miami Management, Inc.

PLEASE REQUEST ALL OF THE ABOVE INFORMATION WELL IN ADVANCE OF A CLOSING FOR MORE EFFICIENT PROCESSING.

NOTE: CERTIFICATE OF ACCEPTANCE APPLICATION FORM PACKAGE: Must be either mailed or picked up at Bonita Lakes Beach Club. Located 14340 SW 122nd Court, Miami, FL 33186 and must be returned to the same location with required checks. The packages may not be faxed.

BONITA LAKES POA
PURCHASER PROCEDURE

The Application Consists of:

- a) Application Instructions.
- b) Purchaser Certificate of Acceptance Form: To be completed by prospective buyers and current unit owner. All spaces in the application must be filled out or the application will be returned to you.
- c) Certificate of Acceptance for Purchase: Once application is completed and Certificate of acceptance is granted, the buyer (s) receives a copy for their records.
- d) Record Update Information Sheet: To be completed by both buyers and seller.
- e) Copy of Executed Contract: A copy of the sales contract must be attached to the application when it is returned for processing.
- f) Process fee: A \$100.00 non-refundable check payable to “Bonita Lakes POA” is required at the time the application is made.

NOTE: PROCESSING AN APPLICATION MAY TAKE A MINIMUM OF FOURTEEN (14) WORKING DAYS.

PLEASE BE AWARE: That per Florida Statute, an owner must be current in their maintenance fee payments to be allowed to rent their unit. If an owner is not current any application for rental will be denied.

**BONITA LAKES POA
C/O BONITA LAKES BEACH CLUB
14340 SW 122ND COURT
MIAMI, FL 33186**

PURCHASER INFORMATION FORM

This form must be completed by the purchaser and unit owner. Upon completion, please submit with a copy of the contract and your check in the amount of \$100.00 payable to “**Bonita Lakes POA**”.

(PLEASE PRINT LEGIBLE-DO NOT LEAVE ANY BLANK SPACES)

PURCHASER'S NAME: _____

FULL PROPERTY ADDRESS: _____

MAILING ADDRESS: _____

TELEPHONE (HOME): _____ WORK: _____

PRESENT ADDRESS: _____

TELEPHONE HOME: _____ WORK: _____

NO. OF OCCUPANTS: _____ NO. OF CHILDREN: _____

CHILDREN'S NAMES AND AGES: _____

AUTOMOBILE MAKE: _____ YEAR: _____ COLOR: _____ TAG: _____

AUTOMOBILE MAKE: _____ YEAR: _____ COLOR: _____ TAG: _____

SOCIAL SECURITY #: _____ DATE OF BIRTH: _____

EMPLOYED BY: _____ HOW LONG: _____

EMPLOYER'S ADDRESS: _____

SUPERVISOR: _____ TELEPHONE: _____

REFERENCES:

PERSONAL FRIEND'S NAME: _____ TELEPHONE: _____

ADDRESS: _____

BANK NAME: _____ TELEPHONE: _____

NEAREST RELATIVE'S NAME: _____ TELEPHONE: _____

ADDRESS: _____

I HAVE RECEIVED COPIES OF ASSOCIATION DOCUMENTS AND RULES AND REGULATIONS AND AGREE TO ADHERE TO THEM. I UNDERSTAND THAT COMMERCIAL VEHICLES AND RECREATIONAL VEHICLES ARE NOT PERMITTED.

BONITA LAKES

REQUEST FOR APPROVAL OF SALE OR TRANSFER

Present Owner: _____

Property Address: _____

Mailing Address if Different: _____

Telephone Home: _____ Work: _____ Cellular: _____

Purchaser Name(s): _____

Present Mailing Address: _____

Telephone Home: _____ Work: _____ Cellular: _____

Number of Occupants: _____ Number of Children: _____

Children's Names and Ages: _____

Proposed Date of Closing: _____

Mortgage Held By: _____ Mortgage Amount: _____

IF CERTIFICATE OF ACCEPTANCE IS GRANTED, I AGREE TO:

1. Provide Purchaser with the Homeowners Association Documents including Rules and Regulations.
2. Submit copy of the **CLOSING STATEMENT OR WARRANTY DEED** to the Association immediately following closing or advise purchaser of the requirement to submit a copy of the documents immediately following the closing.
3. Provide payment coupons to purchaser.

SIGNATURE OF OWNER

DATE

SIGNATURE OF PURCHASER

DATE

SIGNATURE OF PURCHASER

DATE

+++++

TO BE COMPLETED BY OFFICE ONLY

DATE COMPLETED APPLICATION RECEIVED: _____

BY: _____

APPLICATION FEE CHECK NO.: _____ AMOUNT: _____

MAINTENANCE ACCOUNT BALANCE: _____

BONITA LAKES POA
CERTIFICATE OF APPROVAL OF SALE

Approval is hereby granted to: _____

As owner's (s) of Bonita Lakes POA whose home address
is _____ Miami,
Florida 33186.

Approved by: (Signature)

Title

Print Name

Date

+++++

State of Florida

The foregoing instrument was acknowledged before me this _____ day of _____
_____, by _____
of Bonita Lakes POA who is personally know to me or () has produced _____
as identification, executing the foregoing document voluntarily and under the authority vested in
him/her by said cooperation.

My Commission Expires:

Notary Public Signature (Seal)
State of Florida at Large

Printed Name of Notary Public

OFFICE ONLY

AUTHORIZED TO THIRD PARTIES

I hereby authorize all persons, educational institutions, banks and other financial institutions, current and former employers, current and former landlords credit reporting agencies, governmental agencies and other organizations, which Executive Research, Inc. may request.

Applicant Signature

Co-Applicant Signature

Printed Name

Printed Name

Social Security Number

Social Security Number

Date

Date

AUTHORIZATION AND ACKNOWLEDGEMENT

In connection with my Application for Occupancy to _____,
I hereby authorize Executive Research, Inc. to perform an investigation of my credit worthiness, credit standing, character, general reputation, personal characteristics, mode of living and employment/work history, and to provide a discharge Executive Research, Inc. and _____ from any and all claims, damages, liabilities, costs and expenses arising from the retrieving and reporting of such information.

I acknowledge receipt of "A Summary of Your rights Under the Fair Credit Reporting Act" provided to me in accordance with the provisions of the Fair Credit Reporting Act.

Applicant Signature

Co-Applicant Signature

Printed Name

Printed Name

Date

Date

APPLICATION FOR OCCUPANCY

CREDIT ONLY _____
CREDIT & CRIMINAL _____

PURCHASE _____
LEASE _____

DATE _____

Association: Bonita Lakes POA
Desired Date of Occupancy _____ Management Company: Miami Management, Inc.

Applicant: _____ Date of Birth: _____ Social Security #: _____

Co-Applicant: _____ Date of Birth: _____ Social Security #: _____

Single () Married () Separated () Divorced () Maiden Name: _____

Total # of adults who will occupy the home (18 years or older) _____

Total # of children _____

DRIVERS LICENSE# _____ DRIVERS LICENSE# _____

RESIDENCE HISTORY

1). Present Address: _____ Phone No.: _____

City, State, Zip: _____

Association/: _____ Dates of Residency From/To: _____
Landlord

Mortgagee: _____ Rent/Mtg. Amt: _____ Phone No.: _____

Address: _____ Mortgage No.: _____

2). Previous Address: _____ Phone No.: _____

City, State, Zip: _____

Association/: _____ Dates of Residency From/To: _____
Landlord

Mortgagee: _____ Rent/Mtg. Amt: _____ Phone No.: _____

Address: _____ Mortgage No.: _____

3). Previous Address: _____ Phone No.: _____

City, State, Zip: _____

Association/: _____ Dates of Residency From/To: _____
Landlord

Mortgagee: _____ Rent/Mtg. Amt: _____ Phone No.: _____

Address: _____ Mortgage No.: _____

EMPLOYMENT AND BANK REFERENCES

Employer: _____ Phone No.: _____

Address: _____

How Long: _____ Position: _____ Monthly Income: _____

Co-Applicant Employer: _____ Phone No.: _____

Address: _____

How Long: _____ Position: _____ Monthly Income: _____

Bank Reference: _____ Phone No.: _____

Address: _____ Account No.: _____

APPLICATION FOR OCCUPANCY

CHARACTER REFERENCES-DO NOT INCLUDE FAMILY MEMBERS

- 1). Name: _____ Phone Home: _____
Address: _____ Phone Work: _____
- 2). Name: _____ Phone Home: _____
Address: _____
- 3). Name: _____ Phone Home: _____
Address: _____ Phone Work: _____

VEHICLES

Make: _____ Type: _____ Year: _____ Tag No.: _____

Make: _____ Type: _____ Year: _____ Tag No.: _____

The Applicant acknowledges that _____ and/or its agent, Executive Research, Inc. may verify the information supplied by the Applicant in this Application, may obtain credit reports and may investigate the Applicant's credit worthiness, credit, credit history, residential history, and employment/work history, search of the public records of governmental agencies and interviews with character references and others. The Applicant hereby authorizes and consents to _____ and/or its agent, Executive Research, Inc., to perform such verification and investigation.

Applicant Signature

Co-Applicant Signature

Date

Date