

Robles Del Mar Condominium Association, Inc.
c/o Schlitt Property Management, Inc.
1209 U.S. Highway #1
Sebastian, Fl. 32958
(772) 388-6378

Sale / Lease Application

- 1) Please provide copy of contract for sale or purchase.
- 2) Complete Robles Del Mar Application and return with a check made payable to **Robles Del Mar for \$125.00.**
- 3) Complete the Credit & Background check applications for each occupant. Include a copy of each occupants drivers license and return all with Check made payable to **Schlitt Property Management .**
The cost is **\$50.00 per occupant. (2 Adults, 2 Applications, \$100.00)**
- 4) A Capital Contribution fee is due **PRIOR** to the interview. This is **refundable** if for any reason you are not approved. The fee for this unit is \$ **961.36** Please make check payable to **Robles Del Mar.**
- 5) Sign and Return acknowledgement and agreement to the Rules and Regulations.

Once all information is received and checks are processed, an **in person interview** is required. They are held at the Robles Clubhouse.

If you have any questions or concerns, please don't hesitate in contacting me.

Sincerely,

Terry Calhoun, CAM

Robles del Mar
Condominium Association, Inc.
5601 N. Highway 1A
Indian River Shores, Florida 32963

Robles Del Mar Condominium Association

APPLICATION FOR APPROVAL

BUILDING NO. _____ APARTMENT NO. _____ SALE: _____ LEASE _____ DATE: _____

APPLICATION TO LEASE MUST BE ACCOMPANIED BY A **LEASE AGREEMENT**. APPLICATION FOR SALE MUST BE ACCOMPANIED BY AN **AGREEMENT OF SALE**; PROPERLY EXECUTED.

THIS APPLICATION IS FURTHER ACCOMPANIED BY THE REQUIRED FEE OF **\$125.00**. ALL APPLICATIONS TO LEASE OR SALE ARE SUBJECT TO THE APPROVAL OF THE BOARD OF DIRECTORS OF ROBLES DEL MAR CONDOMINIUM ASSOCIATION INC., ALONG WITH A CRIMINAL BACKGROUND AND CREDIT HISTORY CHECK.

FOR SALES ONLY A 2-MONTH CAPITAL CONTRIBUTION FEE, PAYABLE TO THE ROBLES DEL MAR GENERAL OPERATING FUND, WILL ALSO BE REQUIRED AND MAY BE INCLUDED WITH THE APPLICATION FEE. (MONTHLY ASSESSMENT X 2)

THE BOARD OF DIRECTORS OF ROBLES DEL MAR CONDOMINIUM ASSOCIATION, INC., ON BEHALF OF THE ASSOCIATION, HAS A RIGHT OF FIRST REFUSAL

TERMS: _____ CLOSING DATE: _____ OR LEASE DATE _____

OWNER/SELLER: _____

ADDRESS: _____

NAME OF APPLICANT: _____ SPOUSE: _____

AGE RANGE: (30 - 50) _____ (50 - 70) _____ (OVER 70) _____

SOCIAL SECURITY NUMBER: APPLICANT: _____ SPOUSE: _____

DRIVER LICENSE: APPLICANT: _____ STATE OF ISSUE: _____

DRIVER LICENSE: SPOUSE _____ STATE OF ISSUE _____

WILL YOU HAVE CHILDREN LIVING WITH YOU? Yes _____ No _____

DO YOU HAVE PETS? _____ TYPE: _____

PRESENT ADDRESS: _____

HOW LONG AT THIS ADDRESS? _____

PREVIOUS ADDRESS: _____

HOW LONG? _____

BANK REFERENCE: _____ PHONE: _____

OCCUPATION: _____
(IF RETIRED, GIVE PREVIOUS OCCUPATION)

PLEASE GIVE THE NAMES OF TWO REFERENCES, PREFERABLY LOCAL OR FURNISH TWO LETTERS OF REFERENCE TO ACCOMPANY THIS APPLICATION.

NAME _____ PHONE _____

ADDRESS: _____

NAME _____ PHONE _____

ADDRESS: _____

DESCRIBE ALL MOTOR VEHICLES OWNED BY APPLICANT TO BE PARKED IN THE CONDOMINIUM GARAGE. VEHICLES WILL BE PARKED IN THE ASSIGNED SPACES.

YEAR _____ MAKE _____ LICENSE PLATE # _____

YEAR _____ MAKE _____ LICENSE PLATE # _____

UPON APPROVAL OF THIS APPLICATION, I / WE DO HEREBY AGREE TO ABIDE BY THE DOCUMENTS AND RULES & REGULATIONS OF ROBLES DEL MAR CONDOMINIUM ASSOCIATION, INC., WHICH HAVE BEEN EXPLAINED TO ME / US. ROBLES DEL MAR CONDOMINIUM ASSOCIATION, INC. IS HEREBY AUTHORIZED TO MAKE ANY INQUIRIES REGARDING THIS APPLICATION FROM ANY OF THE ABOVE REFERENCES, ALONG WITH A CRIMINAL BACKGROUND CHECK AND CREDIT HISTORY CHECK.

I / WE DO FURTHER UNDERSTAND THAT THE APPROVAL OF THIS APPLICATION IS DISCRETIONARY WITH THE BOARD OF DIRECTORS. ALL INFORMATION SHALL BE DEEMED STRICTLY CONFIDENTIAL.

I / WE HAVE RECEIVED A COPY OF THE RULES & REGULATIONS. YES ___ NO ___

I / WE HAVE RECEIVED A COPY OF THE DOCUMENTS & BYLAWS. YES ___ NO ___

I / WE IN ALL RESPECTS WILL ABIDE BY THE RULES & REGULATIONS AS SET FORTH IN THE DECLARATION OF CONDOMINIUM AND BYLAWS AND AMENDMENTS AND DO AGREE TO THIS BY SIGNING BELOW.

SIGNED _____ DATE _____

SIGNED _____ DATE _____

-----**ROBLES DEL MAR APPROVAL**-----

DIRECTOR: _____ DATE _____
(SIGNATURE)

DIRECTOR: _____ DATE _____
(SIGNATURE)

DIRECTOR: _____ DATE _____
(SIGNATURE)

Notary Public, State of Florida _____

(Notary Seal/Stamp) Print Name of Notary: _____

My Commission expires: _____

Commission No. _____

Background and Credit Report Authorization

The fee is \$ 50.00 per person made payable to Schlitt Property Mngmt.

Vehicle # 1 Make: _____ Model: _____ Year: _____
Vehicle # 2 Make: _____ Model: _____ Year: _____

Applicant: _____ DOB: _____
Applicant: Social Security # _____ Driver's Lic. _____

Phone # _____ E-mail: _____

Present Address: _____
City, State, Zip Code: _____

Previous Address: _____
City, State, Zip Code: _____

Employment History: APPLICANT

Occupation: _____
Employer: _____
Business Address: _____
Employer's phone: _____

Previous Employment: APPLICANT

Occupation: _____
Employer: _____
Business Address: _____
Employer's phone: _____

References (list 3)

1. Name: _____
Address: _____
Phone: _____
Relationship: _____

2. Name: _____
Address: _____
Phone: _____
Relationship: _____

3. Name: _____
Address: _____
Phone: _____
Relationship: _____

EMERGENCY CONTACT INFORMATION: Name: _____
Phone# _____ **Relationship:** _____
Address: _____

Have you ever been convicted of a felony? **APPLICANT:** Yes ___ No ___

If yes, please explain: _____

Have you ever filed bankruptcy? **APPLICANT:** Yes ___ No ___

If yes, please explain: _____

Have you ever been evicted from tenancy? **APPLICANT:** Yes ___ No ___

If yes, when: _____

If yes, why? _____

I declare the foregoing to be true statements. I authorize Robles Del Mar and/or Schlitt Property Management, their agent to do a credit report check and/or check with my employer, and the clerk of the courts for past judgments or evictions and a criminal background check.

Applicant Signature: _____ Dated: _____

*please attach
photo id for
each applicant*

Background and Credit Report Authorization

The fee is \$ 50.00 per person made payable to Schlitt Property Mngmt.

Vehicle # 1 Make: _____ Model: _____ Year: _____
Vehicle # 2 Make: _____ Model: _____ Year: _____

Applicant: _____ DOB: _____
Applicant: Social Security # _____ Driver's Lic. _____

Phone # _____ E-mail: _____

Present Address: _____
City, State, Zip Code: _____

Previous Address: _____
City, State, Zip Code: _____

Employment History: APPLICANT

Occupation: _____
Employer: _____
Business Address: _____
Employer's phone: _____

Previous Employment: APPLICANT

Occupation: _____
Employer: _____
Business Address: _____
Employer's phone: _____

References (list 3)

1. Name: _____
Address: _____
Phone: _____
Relationship: _____

2. Name: _____
Address: _____
Phone: _____
Relationship: _____

3. Name: _____
Address: _____
Phone: _____
Relationship: _____

EMERGENCY CONTACT INFORMATION: Name: _____
Phone# _____ **Relationship:** _____
Address: _____

Have you ever been convicted of a felony? **APPLICANT:** Yes _____ No _____

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I declare the foregoing to be true statements. I authorize _____ and/or Schlitt Property Management, their agent to do a credit report check and/or check with my employer, and the clerk of the courts for past judgments or evictions and a criminal background check.

Applicant Signature: _____ Dated: _____

*Please attach
photo id for
each applicant*