SARATOGA BAY HOMEOWNERS ASSOCIATION, INC. PO Box 222486 West Palm Beach, Fl. 33422

APPLICATION FOR CERTIFICATE OF APPROVAL OF LEASE

\$100.00 Application Fee Required

| Date | e: | _ Lot: | | | | | |
|--|---------------------------|---------------------|--|--|--|--|--|
| Add | dress: | | | | | | |
| INFORMATION CONCERNING APPLICANT Please print clearly. | | | | | | | |
| Name: | | Marital Status | | | | | |
| Present Address | s | | | | | | |
| Email address: | | | | | | | |
| Cell Phone# | - c# | | | | | | |
| Additional Phor | ne# | (work) | | | | | |
| Driver's License | e No. & State | | | | | | |
| Date of Birth | Soc | ial Security Number | | | | | |
| Do you intend to | o occupy the home? | No. of Children | | | | | |
| Cell Phone# | Em | ail address | | | | | |
| | s of children residing in | | | | | | |
| | | | | | | | |
| Occupants in th | e home other than imn | nediate family: | | | | | |
| Name | | Relation: | | | | | |
| 1 (aiiic | | | | | | | |

| Address: Supervisor: | | | | |
|---|--|--|--|--|
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| No | | | | |
| No | | | | |
| No | | | | |
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| I (We) fully authorizeInitial | | answers and references given. |
|-------------------------------|--|--|
| | neowners Association eviewed on our comm | • |
| Initial | | Initial |
| 0 | e requirements of Sai | ed fully executed "Contract to ratoga Bay Homeowners Association |
| Renters or lessees are | e not allowed to sub-l | lease the property at anytime. |
| Estimated Lease Date | e: | |
| | | |
| PRINT NAME: | | DATE: |
| LESSOR: | | |
| PRINT NAME: | | DATE: |
| TITLE: | L: | DATE: |
| PRINT NAME. | | |

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ACKNOWLEDGEMENT FOR CREDIT CHECK/BACKGROUND INVESTIGATION

I understand that the Board of Directors of the SARATOGA BAY HOMEOWNERS ASSOCIATION may require an investigation of my background.

Accordingly, I specifically agree to obtain such an investigation and agree that the information contained in this report may be used in the application process. SARATOGA BAY HOMEOWNERS ASSOCIATION, 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 SARATOGA BAY HOMEOWNERS ASSOCIATION, 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 SIGNATURE | | |
|---------------------|------|--|
| Print name: | | |
| APPLICANT SIGNATURE | | |
| Print name: | | |