

# **CYPRESS COVE HOMEOWNERS ASSOCIATION, INC.**

## **Application Instructions for Resale or Lease**

1. The attached application for occupancy must be completed by the purchaser(s) or lessee(s). Please complete all questions.
2. A copy of the signed sales contract or lease agreement must accompany this application.
3. Please allow 10 days for review of application. Occupancy prior to approval is prohibited.
4. As a member of the Association, you are agreeing to abide by the Association's Documents as recorded in the Palm Beach County Official Records. If you have not received a copy of these documents from the Owner/Seller of your unit, they are available to you from the management office by calling (561) 624-5888, for a fee of \$25.00.
5. If leasing, the owner must make a copy of the Governing Documents available to the Lessee. Owners are responsible for the actions of tenants and all guests and subject to fines for violation of the Association Documents and/or the Rules & Regulation by the tenant or guest.
6. Leases shall provide for a term of not less than six (6) months.
7. A \$100.00 non-refundable application fee is required with the application made payable to Cypress Cove Homeowners Association, Inc.

**Please submit completed application and a copy of the sales contract or lease agreement to:**

**Capital Realty Advisors, Inc.  
600 Sandtree Drive, Suite 109, Palm Beach Gardens, FL 33403  
561/624-5888 / fax: 561/624-5827**

### **~ General Reminders to New Homeowners ~**

1. Assure that your title company has verified that all homeowner fees on your new home have been paid. These fees are a lien against your unit, and you could be responsible if they are outstanding.
2. Please instruct your title company to forward a copy of your warranty deed to Capital Realty Advisors, Inc. as soon as possible. Management will not change the name on the official records without receiving this information. It is the homeowner's obligation to make sure that mailing addresses and telephone numbers are up to date with the management company.
3. Unit Owner fees are due in advance on the first day of each month. It is the unit owner's responsibility to pay these fees regardless if coupons were sent. If you require a coupon, please call Capital Realty Advisors, Inc. at 561-624-5888.
4. Please obtain all keys or Amenity access key fobs from the Owner/Seller.

**CYPRESS COVE HOA, INC.**

**APPLICATION FOR RESALE OR LEASE - PLEASE PRINT**

\_\_\_ Check here if lessee is an active member of the military service.

DATE: \_\_\_\_\_ OCCUPANCY DATE: \_\_\_\_\_  
(IF LEASING, TERM-FROM-TO)

PROPERTY ADDRESS: \_\_\_\_\_  
(BEING PURCHASED OR LEASED)

REALTOR: \_\_\_\_\_ PHONE #: \_\_\_\_\_

OWNER NAME(S): \_\_\_\_\_ PHONE# \_\_\_\_\_

OWNER(S) MAILING ADDRESS: \_\_\_\_\_

**APPLICANT INFORMATION**

APPLICANT(S): \_\_\_\_\_  
(NEW OWNER NAME (AS TITLE WILL APPEAR) or NEW LESSEE NAME)

PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

IN ADDITION TO APPLICANT(S), LIST OTHERS WHO WILL RESIDE IN UNIT:

NAME \_\_\_\_\_ AGE \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

IN CASE OF EMERGENCY NOTIFY: \_\_\_\_\_

**PART 1 – PRESENT RESIDENCE**

PRESENT ADDRESS: \_\_\_\_\_

PHONE #(S): \_\_\_\_\_

**PART 11 – PRESENT EMPLOYMENT**

EMPLOYED BY \_\_\_\_\_ PHONE \_\_\_\_\_  
(OR RETIRED FROM) (BUSINESS NAME IF SELF EMPLOYED)

HOW LONG \_\_\_\_\_ POSITION \_\_\_\_\_ ADDRESS \_\_\_\_\_

PARTNER'S EMPLOYMENT \_\_\_\_\_ PHONE \_\_\_\_\_

HOW LONG \_\_\_\_\_ POSITION \_\_\_\_\_ ADDRESS \_\_\_\_\_

**PART III – PERSONAL REFERENCES**

NAME \_\_\_\_\_ HOME \_\_\_\_\_ OFFICE \_\_\_\_\_

NAME \_\_\_\_\_ HOME \_\_\_\_\_ OFFICE \_\_\_\_\_

NAME \_\_\_\_\_ HOME \_\_\_\_\_ OFFICE \_\_\_\_\_

**PART IV - VEHICLES**

MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ YEAR \_\_\_\_\_ PLATE# \_\_\_\_\_ STATE \_\_\_\_\_

MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ YEAR \_\_\_\_\_ PLATE# \_\_\_\_\_ STATE \_\_\_\_\_

DRIVERS LICENSE # \_\_\_\_\_ DRIVERS LICENSE # \_\_\_\_\_

**PART V – PETS**

WILL PETS RESIDE IN UNIT? NO \_\_\_ YES \_\_\_ IF YES, LIST BREED AND WEIGHT:

\_\_\_\_\_

**ACKNOWLEDGEMENT**

I/We hereby agree on behalf of all persons who may use the unit, which I seek to purchase or lease, that I/We have read, understand and will abide by all Restrictions in the By-Laws, Rules and Regulations and Association Documents. I/We understand that failure to follow the Rules and Regulations will subject us to violation notices, fines, etc. I/We understand that the acceptance for purchase or lease is conditioned upon the truth and accuracy of this application and upon the approval of the Board. I give my full authorization to verify the above information.

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

OWNER SIGNATURE (IF LEASING) \_\_\_\_\_ DATE \_\_\_\_\_

**BOARD APPROVAL(S)** \_\_\_\_\_ **DATE** \_\_\_\_\_