

OASIS AT PALM AIRE ASSOCIATION, INC.
c/o Campbell Property Management
3500 Gateway Drive #202
Pompano Beach, FL 33069
Phone: (954) 968-4481

APPLICATION FOR LEASE

THIS APPLICATION REQUIRES NOTARIZATION OF RENTER'S SIGNATURE(S)

INSTRUCTIONS:

1. This application must be completed in detail by each proposed lessee/occupant.
2. This application must be accompanied by a copy of the lease agreement.
3. The Association has 30 days to complete its processing from the date of receipt of the fully completed application, all fees and any supplemental information required. If a question is not answered adequately or left blank, this application may be returned, not processed, and not approved.
4. The owner must provide the lessee with a copy of all Rules & Regulations.
5. All applicants must make themselves available for a personal interview with the Board of Directors for approval. Occupancy prior to Board approval is prohibited.
6. All maintenance fees and assessments must be paid up to date prior to receipt and processing of lease application.
7. All applicants must provide Proof of Income: 1 month of pay stubs PLUS 2 months of bank statements.

FEES REQUIRED*:

1. \$150 non-refundable processing fee must be attached to this application, made payable to Oasis at Palm Aire.
2. \$500.00 common area security deposit made payable to Oasis at Palm Aire.

* Acceptance of either fee does not in any way constitute approval of the application.

OCCUPANCY RESTRICTIONS:

1. Pets require prior board approval.
2. No commercial vehicles, trucks, boats, trailers, motor homes, mobile homes, campers, or recreational vehicles permitted on HOA premises.
3. Leases for less than 6 months (180 days) are prohibited without the approval of the Board.

NOTICE OF INTENTION TO LEASE

DATE: _____

TO: OASIS AT PALM AIRE ASSOCIATION, INC.
3500 Gateway Drive, Suite 202 Pompano Beach, Fl. 33069

I/We hereby serve notice that as owner(s) of the property located at _____,
the undersigned intend(s) to offer said home for lease.

Said home is to be leased for the period starting _____ and ending _____ at a
rental rate of \$ _____ per _____.

- I/We acknowledge that leases for less than ONE HUNDRED EIGHTY (180) days are prohibited.
- I/We acknowledge that this Notice must be accompanied by a copy of the proposed lease. Any changes to the lease must be submitted to the Association in advance of the tenant taking possession.
- I/We hereby acknowledge our obligation and responsibility to ensure my/our tenants compliance with the HOA Declaration and the Association Rules and Regulations, and the authority of the Association and the Management Firm, in the event the Association consents to a lease, to take such action as may be required to obtain compliance to the Lessee(s), and/or their guests, with the HOA Declaration and the Association Rules and Regulations.
- I/We understand that the tenant may not take possession of the above unit until written approval is received from the Association.
- A completed Application by Proposed Lessee accompanies this Notice, together with a check in the amount of One Hundred Fifty Dollars (\$150.00) per person to cover the fee of processing this transaction.
- I/We understand that acceptance of the processing fee does not constitute approval of this transaction.

Owner's Signature

Owner's Printed Name

Owner's Signature

Owner's Printed Name

ADDENDUM TO LEASE AGREEMENT

OASIS AT PALM AIRE ASSOCIATION, INC.

1. The Association and/or its authorized agent shall have the irrevocable right to have access to each home from time to time during reasonable hours as may be necessary for inspection, maintenance, repair, or replacement of any Common Elements therein or accessible therefrom, or for making emergency repairs therein necessary to prevent damage to the Common Elements to another home or homes.
2. The Lessee agrees not to use the demised premises, or keep anything in the unit which will increase the insurance rates of the unit or interfere with the rights of other residents of the Association or any other residents by unreasonable noises or otherwise; nor shall Lessee commit or permit any nuisance, immoral or illegal act in his unit, or the Common Elements, or the Limited Common Elements.
3. The Lessee covenants to abide by the Rules and Regulations of the Association, and the terms and provisions of the Declaration, Articles of Incorporation, and By-Laws of the Association, and agrees to be bound by the rules and guidelines of the Association and any other rules which may become operative from time to time during said leasehold.
4. The Owner/Lessor warrants that all payments of maintenance, assessment and other charges or obligations currently due will be or have been paid to this date.
5. The approval of the proposed Lease Agreement issued by the Association is to be expressly conditioned upon the Owner's/Lessor's and Lessee's observance of the provisions contained in this Addendum. Any breach of the terms hereof shall give the Association the authority to take immediate steps to terminate the Lease Agreement. The Owner/Lessor acknowledges that he remains ultimately responsible for the acts of Lessee and Lessee's family and guests and for any costs incurred by Association, including attorneys' fees, in remedying violations of this Addendum and/or violations of the HOA documents.
6. In the event the Owner becomes delinquent in the payment of any sums and assessments due to the Association during the terms of the Lease Agreement, upon written demand by the Association, Lessee shall pay directly to the Association rental payments due to the Owner. The Association shall be granted the full right and authority to demand and receive the entire rent due from the Lessee and deduct from the rent all assessments, interest, late charges and attorney's fees and costs, if any, due to the Association. The balance, if any, shall be forwarded to the Owner at such address as the Owner may designate in writing. At such time as the delinquency no longer exists, the Association shall cease the demand and payments shall again be made by the Lessee directly to the Owner. This right may be exercised by the Association at any time the Owner shall become delinquent.

Signed and agreed to on this _____ day of _____, _____ by:

Owner/Lessors:

Print Name

Signature

Print Name

Signature

Lessees:

Print Name

Signature

Print Name

Signature

OASIS AT PALM AIRE ASSOCIATION, INC.
"The best kept secret in Broward County"
C/O Campbell Property Management
3200 Gateway Drive, Ste 202
Pompano Beach, FL 33069
Phone: (954) 968-4481 * Fax: (954) 970-9367

OASIS RENTAL POLICY (7-02)

This "Rental Policy" is intended to make Oasis homeowners, renters and Realtors aware of the Association policies and standards that govern the rental of homes in the Oasis.

Oasis is a private gated-community of 167 homeowners joined together in a common interest to live in a quiet, secure, safe, and friendly environment. Its roads are private, as are its other common areas that include a clubhouse and recreational facilities.

This is not a rental community, and approval to rent houses on a yearly basis will be governed by strict rules followed by an interview process, administered by our management company, Campbell Property Management.

The interviewer will be guided by the following policy standards and rules that shall be made a part of any approved rental agreement:

- Rental request of a house in which homeowner has lived less than one year will be rejected, except in emergency situations based on presentation of reasonable evidence.
- A character and financial investigation may be required, and a reasonable cost borne by the homeowner, which amount Committee will determine periodically.
- An escrow amount not to exceed \$500 may be required to cover the cost of any damaged Association common-area facilities.
- All rentals will limit occupancy to one couple, one child per bedroom, and dogs must be approved by board and landlord. [This restriction mitigates the degree of time and cost to the Association to enforce its rules and regulations against a rental tenant, as well as homeowner]
- For good cause, which includes violation of these rules, the Association may order rental tenant to vacate within 30 days, and to impose fines and sanctions against homeowner.
- All rental agreements must be submitted for approval to the management company, Campbell Property Management
- Rental tenants will be held to standards that are reasonable and that protect the interests of homeowners. [This restriction is imposed because a homeowner is seldom present or nearby to police compliance by its tenants with Association rules and covenants, which places an added enforcement burden on the Association.]
- Rental agreements shall require compliance with Oasis Restrictions, Rules & Covenants, plus the Oasis "Enforcement Committee Checklist of Rules (6-02)."

Signature: _____ Signature: _____ Date: _____

Campbell Property Management

Updated 01/08/20

LEASE APPLICATION

All questions must be answered in full by the Lessee for this application to be processed.

Date _____ Terms of the Lease: From _____ To _____

Property Address _____

Owner's Name _____ Telephone # _____

Owner's Present Address _____

Name of Realtor (Agent): _____ Telephone # _____

Name of Prospective Lessee (as it will appear on the lease agreement):

(A) _____ (B) _____

Minor children who will occupy the home with you:

_____	_____	_____	_____
Name	Birth Date	Name	Birth Date
_____	_____	_____	_____
Name	Birth Date	Name	Birth Date

Other persons who will occupy the home with you:

_____	_____	_____
Name	Age	Relationship
_____	_____	_____
Name	Age	Relationship

Have you ever seasonally resided in Palm Aire before: _____ If yes, please state the name, address and dates of residency. _____

AGREEMENT:

1. I hereby agree for myself and on behalf of all persons who may use the home which I seek to lease that I will abide by all the restrictions contained in the by-laws, rules and regulations, HOA documents, and restrictions which are or may in the future be imposed by Oasis at Palm Aire Association, Inc.
2. I have received a copy of the Rules & Regulations: Yes _____ No _____
3. I understand that I will be advised by the Board of Directors of the interview date and time. I understand that the Association has 30 days from the date this application and any supplemental information required by the Association is received in which to process this application.
4. I understand that all pets require Board approval.

5. I understand that the acceptance for leasing of a house at Oasis at Palm Aire Association, Inc. is conditioned upon the truth and accuracy of this application. Any misrepresentation or falsification of the information on these forms will result in the automatic rejection of this application. Occupancy prior to the Board of Directors approval is prohibited.

Lessee's Signature _____ Lessee's Signature _____

Print Name _____ Print Name _____

Present Address _____

Telephone: _____ Telephone: _____

Email Address: _____

THIS DOCUMENT MUST BE NOTARIZED

Sworn to and subscribed before me this _____ day of _____, _____ by
_____ who is personally known to me or produced identification .

Notary Public

My Commission Expires:

For Board of Directors' Use

Date Approved _____

Date Disapproved _____

Board Member's Signature _____

READ FIRST: Complete all questions and fill in all blanks. All information supplied is subject to verification. If any question is not answered/left blank, or answered falsely, this application may be returned, not processed, and/or not approved. Missing information will cause delays. Once submitted, order can be cancelled but your fee will not be refunded. Rev. 06/2014

**** THIS APPLICATION IS FOR A SINGLE PERSON OR A MARRIED COUPLE ONLY! ****

APPLICATION FOR OCCUPANCY

Association Name: Oasis at Palm Aire Association, Inc.

Circle one: Purchase - Lease - Occupant - Unit.# _____ Bldg.# _____ Address applied for: _____

Full Name _____ Date of Birth _____ Social Security # _____

Circle One: Single - Married - Separated - Divorced - How Long? _____ Other legal or maiden name _____

Have you ever been convicted of a crime? _____ Date (s) _____ County/State Convicted in _____

Charge (s) _____

Applicant's Cell Number(s) _____ Applicant's Email Address _____

Spouse _____ Date of Birth _____ Social Security # _____

Other legal or maiden name _____ Have you ever been convicted of a crime? _____ Date (s) _____

County/State Convicted in _____ Charge (s) _____

Spouse's Cell Number(s) _____ Spouse's Email Address _____

No. of people who will occupy unit - Adults (over age 18) _____ Description of Pets _____

Names and ages of others who will occupy unit _____

In case of emergency notify _____ Address _____ Phone _____

PART I - RESIDENCE HISTORY

A. Present address _____ Phone _____
(Include unit/apartment number, city, state and zip code)

Apt. or Condo Name _____ Phone _____ Dates of Residency: From _____ to _____

Circle one: Own Home - Parent/Family Member - Rented Home - Rented Apt - Other _____ Rent/Mtg Amount _____

Are you on the Lease? _____ If not, who is the leaseholder? _____ Are you on the Deed? _____ If yes, under what name? _____

Name of Landlord _____ Phone _____ Email address _____

Circle one: Is your Landlord the: Owner of the property - Realtor - Family Member - Roommate - Property Manager - Other _____

B. Previous address _____
(Include unit/apartment number, city, state and zip code)

Apt. or Condo Name _____ Phone _____ Dates of Residency: From _____ to _____

Circle one: Own Home - Parent/Family Member - Rented Home - Rented Apt - Other _____ Rent/Mtg Amount _____

Were you on the Lease? _____ If not, who is the leaseholder? _____ Were you on the Deed? _____ If yes, under what name? _____

Name of Landlord _____ Phone _____ Email address _____

Circle one: Is your Landlord the: Owner of the property - Realtor - Family Member - Roommate - Property Manager - Other _____

C. Previous address _____
(Include unit/apartment number, city, state and zip code)

Apt. or Condo Name _____ Phone _____ Dates of Residency: From _____ to _____

Circle one: Own Home - Parent/Family Member - Rented Home - Rented Apt - Other _____ Rent/Mtg Amount _____

Were you on the Lease? _____ If not, who is the leaseholder? _____ Were you on the Deed? _____ If yes, under what name? _____

Name of Landlord _____ Phone _____ Email address _____

Circle one: Is your Landlord the: Owner of the property - Realtor - Family Member - Roommate - Property Manager - Other _____

PART II – EMPLOYMENT REFERENCES

Include a recent copy of an earnings statement to expedite processing

- A. Employed by _____ Phone _____
 Dates of Employment: From: _____ To: _____ Position _____ Fax _____
 Monthly Gross Income _____ Address _____
- B. Spouse Employed by _____ Phone _____
 Dates of Employment: From: _____ To: _____ Position _____ Fax _____
 Monthly Gross Income _____ Address _____

PART III – BANK REFERENCES

Include a recent copy of a bank statement to expedite processing

- A. Bank Name _____ Checking Acct. # _____ Phone _____
 Address _____ Fax _____
- B. Bank Name _____ Savings Acct. # _____ Phone _____
 Address _____ Fax _____

PART IV – CHARACTER REFERENCES (No Family Members)

1. Name _____ Home Phone _____
 Address _____ Business Phone _____
 Email Address _____ Cellular Phone _____
2. Name _____ Home Phone _____
 Address _____ Business Phone _____
 Email Address _____ Cellular Phone _____
3. Name _____ Home Phone _____
 Address _____ Business Phone _____
 Email Address _____ Cellular Phone _____
4. Name _____ Home Phone _____
 Address _____ Business Phone _____
 Email Address _____ Cellular Phone _____

Are you using a realtor? Yes _____ No _____ If yes: Realtor's name _____
 Email Address _____ Cellular Phone _____

Driver's License Number (Primary Applicant) _____ State Issued _____

Driver's License Number (Secondary Applicant) _____ State Issued _____

Make _____ Type _____ Year _____ License Plate No. _____

Make _____ Type _____ Year _____ License Plate No. _____

If this application is not legible or is not completely and accurately filled out, Associated Credit (and the Association) will not be liable or responsible for any inaccurate information in the investigation and related report (to the Association) caused by such omissions or illegibility.

By signing the applicant recognizes that the Association and Associated Credit will investigate the information supplied by the applicant, and a full disclosure of pertinent facts will be made to the Association. The investigation may be made of the applicant's character, general reputation, personal characteristics, credit standing, police arrest record and mode of living as applicable. This form is for the exclusive use of Associated Credit Reporting, Inc.

Applicant's Signature _____ Date _____ Spouse's Signature _____ Date _____

ASSOCIATED CREDIT REPORTING, INC.

Established 1985

4690 NW 103rd Avenue, Sunrise, Florida 33351
www.associatedcreditreporting.com

Phone: 754-216-0025
Toll Free: 800-676-7640
Fax: 954-635-2157
Toll Free Fax: 800-235-7185

AUTHORIZATION FORM

I/We hereby authorize Associated Credit Reporting, Inc. to obtain data to verify any and all information they request with regards to my/our Application for Occupancy, specifically the verification of my bank account(s), credit history, residential history, criminal record history, employment verification and character references.

I/We hereby waive any privileges I/we may have with respect to the said information in reference to its release to the aforesaid party. Information obtained for this report is to be released to the authorized party designated on the Application for Occupancy, for their exclusive use only. PLEASE INCLUDE COPY OF DRIVER'S LICENSE TO CONFIRM IDENTITY. If you do not have a driver's license, please include a copy of your Passport or current government issued identification card.

I/We acknowledge our rights as stated in the Fair Credit Report Act that I/we are entitled to a copy of the report upon proper written request and can dispute any inaccurate information for re-verification. I/We understand that Associated Credit Reporting, Inc. is not directly involved in the approval or denial of any applicant. The information received by Associated Credit Reporting, Inc. shall be held in strict confidence, protected as governed under the Fair Credit Reporting Act, and will never be released to any third party other than the designated recipient. I/We further understand that this is a non-refundable process.

By signing below, I/We further state the Application for Occupancy and Authorization Form were signed by me/us and was not originated with fraudulent intent by me/us or any other person and that the signature(s) below are my/our own proper legal signature. I/We certify (or declare) under penalty of perjury that I/We agree to the foregoing and; that all answers and information contained on the Application for Occupancy are true and correct and will hold Associated Credit Reporting, Inc. harmless from the result of the investigation.

(Applicant's Signature)

(Spouse's Signature)

(Applicant's Name Printed)

(Spouse's Name Printed)

(Date Signed)

(Date Signed)

OASIS AT PALM AIRE ASSOCIATION, INC.
3500 Gateway Drive Suite 202
Pompano Beach, FL 33069
954-968-4481

Last Name: _____ First Name: _____

Address: _____ Lot #: _____

Main contact phone number: _____

Alternate contact phone numbers: _____

Email Address: _____

Name of Owner / Tenant: _____

Names of Additional Residents: _____

Resident Vehicle Description & Tag Numbers (NO COMMERCIAL VEHICLES ALLOWED)

Comments / Additional Information:

Emergency Contacts:

OASIS AT PALM AIRE ASSOCIATION, INC.
"The best kept secret in Broward County"



MyEnvera Registration Form

Important Instructions:

This form must be submitted by an Authorized Community Contact to myenvera@enverasystems.com. **RESIDENTS, PLEASE PROVIDE THE COMPLETED DOCUMENT TO YOUR PROPERTY MANAGER OR COMMUNITY STAFF.**

Please type or print clearly. Attempting to submit this form via an unauthorized contact or illegibly will delay processing.

If multiple tenants reside at the same address, each must complete their own form.

Community Name:	City:	State:
Property Street Address (including unit if applicable):		

<input type="checkbox"/> NEW Homeowner	<input type="checkbox"/> UPDATE Existing Homeowner	<input type="checkbox"/> NEW Tenant	<input type="checkbox"/> UPDATE Existing Tenant
New Homeowner Move In Date:	Tenant Lease Start:	Tenant Lease End:	

Should all prior homeowners/tenants be removed? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please provide date to be removed:

For communities with Envera's Virtual Gate Guard and/or Guard Module Software, a household has a primary contact: The primary number is the first phone number that will be used when an Envera representative needs to contact you. The secondary number will be used if a homeowner/tenant cannot be reached at the first number. A primary email address will be used for service-related and MyEnvera account communications. <u>If an email is not provided</u> , MyEnvera login credentials will be emailed to your property manager or community contact.	
Primary Contact Name:	
Primary Number:	Secondary Number:
Primary Email Address:	
Secondary Contact Name:	
Primary Number:	Secondary Number:
You can add additional household members on your MyEnvera account.	

If Envera provides additional access control services at your community, including resident vehicle access and/or amenity access, please complete the separate access control form.

Once this form is submitted, please allow up to **48 hours** for processing. Once a registration form has been processed, a MyEnvera account will be created for you, and you will have access to manage your household information via our MyEnvera Android/Apple app or website <https://myenvera.com>. After you receive your account information, please be sure to visit the app or website to create your visitor list. This list should be used for any and all relatives, house guests, or vendors that you expect for your household.

The information above will remain confidential and will be used solely for the purpose stated. It is the responsibility of the homeowner/tenant to keep the information above current. Please advise of any changes, additions, or deletions by logging on to your MyEnvera account or by emailing myenvera@enverasystems.com.

Oasis Vehicle Sticker Criteria

1. Vehicles must be registered to either the resident or the home to receive stickers. Only legal residents of the home are entitled to a vehicle sticker.
2. A legal renter must meet the above criteria and present the lease proving residency. Residents of rental home must be listed on lease or be a dependent of resident and live in the home.
3. More than two stickers can be issued to a resident, providing they meet the criteria listed in 1 or 2 above, and pay a fee for each sticker, currently \$12.00 each. The fee will be paid to the Property Manager's office.
4. The stickers will be activated on the first business day after purchase at the Property Management office.
5. When a resident moves out of Oasis, the vehicle stickers will be deactivated by the Property Manager. Stickers are not transferable between vehicles.
6. When new residents, whether owners or renters, move in, they are entitled to up to two stickers initially at the cost of \$12.00 providing they meet the criteria in 1 and 2 above. They may also purchase additional stickers and they will be required to pay the \$12.00 fee per sticker providing they meet the criteria in 2 and 3 above.
7. Misuse of stickers (such as not attaching them to the windshield of the vehicle), will result in deactivation of the resident's sticker which means that they will have to use the guest lane to enter Oasis.
8. Stickers will not be issued for commercial use vehicles, or any vehicle that is excluded in the association according to the Declaration of Covenants Restrictions and Easements under use restriction article XI section D.