

# **PURCHASE PACKAGE**

UNIT #_	
NAME:	
PARKING SPACE # _	

19501 WEST COUNTRY CLUB DRIVE, AVENTURA FLORIDA 33180 PHONE 305 466 7767  $\quad * \quad$  FAX 305 466 7741



#### CHECK LIST PURCHASE

#### FOLLOW UP CHECK LIST

TO BECOME A RESIDENT, YOU MUST HAVE A CREDIT SCORE OF 700 OR HIGHER. THE PROCESSING TIME FOR AN APPLICATION MAY TAKE UP TO 20 DAYS. THE ASSOCIATION WILL NOT ACCEPT INCOMPLETE APPLICATIONS.

In order for the Association to release the Certifica statement (HUD-1) and get it approved by the Association	ate of Approval, the closing agency must send the Preliminary closing ion; the orientation must be completed.
COPY OF SALES CONTRACT (NO CONTRACTS V	WITH ASSIGNEES WILL BE ACCEPTED)
\$100.00 BACKGROUND CHECK FEE (CASHIER'S	CHECK PAYABLE TO YUKA SECURITY) – NON-REFUNDABLE
\$250.00 TRANSFER FEE, (CASHIER'S CHECK PA	YABLE TO TURNBERRY ON THE GREEN CONDOMINIUM ASSOC.)
\$1000.00 Cashier check ELEVATOR SECURITY DE	POSIT (REFUNDABLE)
COMPLETED APPLICATION & FINANCIAL STATE (U.S. DOLLARS ONLY. NO FOREIGN CURREN	
	AST TWO YEARS OF INCOME TAX RETURN, SSI, (IF RETIRED), OKERAGE FIRMS STATEMENTS. (ACCOUNTANTS LETTERS OME.)
COMPLETED UNIT OWNER'S INFORMATION SH	HEET
COPY OF PHOTO ID (Driver's License or Passport).	
PROOF OF STATUS (PLEASE PROVIDE ONLY ON Card Birth Certificate Legal Alien Card V	NE OF THE FOLLOWING): American passport Voters Registration Visa other
RULES & REGULATIONS ACCEPTANCE (TWO F	ORMS).
DIRECT PAYMENT PROGRAM (Form provided). P payments.	lease include a cancelled check drawn from the account you will use for the
MORTGAGE COMMITMENT	
MOVE-IN / MOVE-OUT AUTHORIZATION FORM	I.
IN THE EVENT OF NON-ENGLISH-SPEAKING AF THE APPLICANT TO ARRANGE FOR AN INTERE	
THE TURNBERRY ON THE GREEN ADMINISTRATION.	ATION RESERVES THE RIGHT TO REQUEST ADDITIONAL
HOME ONWER'S INSURANCE (Binder)	
Buyer's signature	Buyer's signature
Print name	Print name
	Statement (HUD-1) and get it approved by the Associate COPY OF SALES CONTRACT (NO CONTRACTS VIOLONG SALES CONTRACT (NO CONTRACTS VIOLONG SALES CONTRACT (NO CONTRACTS VIOLONG SECURITY OF SECURITY DE SECURITY DE COMPLETED APPLICATION & FINANCIAL STATEMENT OF BANK/BROWILL NOT BE ACCEPTED AS PROOF OF INCOMPLETED UNIT OWNER'S INFORMATION SECURITY OF SECURITY OF SECURITY DE COMPLETED UNIT OWNER'S INFORMATION SECURITY OF

MM/DD/YY

MM/DD/YY



# IF THE APARTMENT IS BEING PUCHASED BY A CORPORATION, PLEASE INCLUDE THE FOLLOWING:

( )	Articles of incorporation
( )	List of Officers of Corporation
( )	Resolution of Corporation providing the names of the primary users of the apartment
( )	Financial Statement (form provided)
( )	Personal Guarantee by Corporate Officer (form provided)
Unit#	
Date: _	
Name:	



# **PERSONAL GUARANTEE** (when purchased by corporation)

I,	, owner and/or officer of
	a
(State) Corporation, p	ersonally guarantee and assume all liability and/or
responsibility to the Turnberry On The Green G	Condominium Association for any amounts due, and
all affairs of	, Owners of Unit #
Signature:	_
Print Name:	_
COUNTY:	STATE:
The foregoing instrument was acknowledged be	
online notarization, thisday of, 2020	o, by(name of officer
or agent, title of officer or agent) of	(name of corporation
acknowledging), a(state	or place of incorporation) corporation, on behalf of
the corporation.	
Personally Known □ OR□ Produced Identi	fication
<b>Type of Identification Produced:</b>	
(Signature of Notary Public)	
(Print, Type, or Stamp Commissioned Name of	Notary Public)
My Commission expires:	
Affix Notary SEAL	

Online Notary: □(Check Box if acknowledgment done by Online Notarization)



UNIT#	

#### APPROVAL CRITERIA

- 1. Approval of the Association shall be withheld only by the vote of a majority of the Board. Notwithstanding anything contained herein to the contrary, approval shall not be withheld so as to violate the requirements or restrictions of any applicable federal, state or local law. In deciding whether to approve or disapprove a transfer, the Board may consider the following factors and may confer freely with counsel in reaching its decision. Good cause for disapproval may include, but not be limited to, the following:
  - a. The person seeking approval, or any proposed occupant, has been convicted of a felony involving violence to persons or property, the sale, distribution or use of a controlled substance, a felony demonstrating dishonesty or moral turpitude, or a charge of such felonies where the person was not acquitted and the charges were not dropped.
  - b. The person seeking approval has a record of financial irresponsibility, including bankruptcies, foreclosures, bad debt and/or insufficient income.
  - c. The application for approval indicates on its face that the person seeking approval, or any proposed occupant, is unable to comply with the covenants and restrictions applicable to the condominium. For example, without limitation, the application of a prospective purchaser or lessee who intends to move in a dog, demonstrates that the application is inconsistent with the pet restriction contained elsewhere in the Rules and Regulations would violate such restriction.
  - d. The person seeking approval, or any proposed occupant, has a history of disruptive behavior or disregard for the rights and property of others as evidenced by his conduct in other social organizations or associations, or by his conduct in this Condominium as tenant, Owner or occupant of a Unit in other situations.
  - e. The person seeking approval, or any proposed occupant, failed to provide the information, fees or appearance required to process the application in a timely manner.
  - f. All assessments and other charges against the Unit have not been paid in full.
- 2. If the Association disapproves the proposed transaction, notice of disapproval shall promptly be sent in writing to the owner or interest holder, and the transaction shall not be made. The Association need not approve any sale, transfer, or lease until such time as all unpaid assessments and all court costs and attorneys' fees (if any) incurred by the Association and due and owed for the unit have been paid, all transfer fees have been paid, and the prospective purchaser or lessee, together with all prospective residents who have reached the age of maturity, have appeared for a screening.

Seller Signature	Buyer Signature
Print Name	Print Name



#### BUYER'S INSTRUCTIONS FOR COMPLETING APPLICATION FOR PURCHASE, GIFT OR INHERITANCE APPROVAL

**LEGIBLE AND EXECUTED** copy of sale contract with both parties' signatures to be presented for review to the Management Office before any further processing.

- 1. The Screening Committee and the Board of Directors prohibit occupancy prior to approval. Use of the unit is for single-family residence only.
- 2. Unit Owners may not have pets.
- 3. We reserve the right to request any information, which may be necessary to process the application.
- 4. Every potential owner of a unit, age 18 and older, must complete an application form. A non-refundable background check fee of \$100.00 money order made payable to Turnberry on The Green shall accompany each application form with the following exceptions: a husband and wife or a parent and dependent children are considered one applicant for purposes of payment of this fee. The above-mentioned rule applies to primary users of a unit purchased by a corporation. Corporate purchases require additional forms and documents.
- 5. All forms must be filled out in total with no blank spaces and with original signatures, or the application will be returned for completion. Leave application package in the office when it is ready. Missing documents and/or information will cause delays and the application will not be processed. Character references provided by the Realtor handling the application, by applicant's relatives or by the Unit Owner will not be accepted
- 6. Please include a copy of the last two years of income tax return, SSI (if retired), and/or the last two months of bank statements. (Accountant's letters will not be accepted as proof of income).
- 7. Proof of citizenship, permanent residency or visa of all prospective occupants must accompany application.
- 8. An interview with all prospective occupants, age 16 and older, is required and should be requested at least 30 DAYS in advance of the closing (sale). An appointment for an interview will be made through the office. You will be notified of the date and time. All prospective occupants are required to be present. All applicants must present original picture ID to the office on the date of the interview. Applicants must read Rules and Regulations before the interview. The closing on a Unit should not be scheduled the same day or the day following the interview; as it may take from 3 to 20 days for Board review and approval.
- 9. Move-in / move-out hours are from 8:30 AM to 5:00 PM weekdays. Moving is prohibited on Saturday, Sunday and Holidays. The purchaser, if approved, must give the Association \$1,000.00 money order as a refundable security deposit. If no damage is done to the Common Areas during the move, the deposit will be returned to the purchaser after the move is complete.
- 10. A Warranty Deed and Closing Statement must be given to the Association's Management Office before the final authorization to "Move into Unit" form is issued.
- 11. It is the Realtor's responsibility to show the prospective occupant all common areas of Turnberry on The Green (pool and barbecue area, parking garage, storage bin area, mail room, etc.)
- 12. It is the unit owner's responsibility to provide the new owner with access fobs and keys to the apartment, storage bin, and mail box.

Buyer's signature	Unit #
Print name	Date (mm/dd/yy)



### ACKNOWLEDGEMENT OF PET POLICY

NAME OF APPLICANT:	
UNIT #	-
Resident to sign below:	
I am aware of the Turnberry on the Green Coron the property and agree to abide by them.	ndominium Association's Rules & Regulations and restrictions that pets are not permitted
Signature	Date



# LETTER OF INTENTION TO SELL, LEASE OR LEASE RENEWAL

Application to: (check one)	sell	lease	lease renewal	
TO: BOARD OF DIRECTORS				
In accordance with the provisions of the Association, Inc., I/We hereby serve	e notice that I/We des , to purchase/leas	sire to accept a bore/lease renewal <b>Unit</b> #	na fide offer made to me /u If a lease/lease renewal, th	is <b>by</b> ne term
is for a period starting minimum of six (6) months. There will be amount refundable security deposit will be the right of first refusal.	only one occupancy during	the term of the lease. F		's rent
I/We, agree to provide to the purchaser a cand Regulations, or to the lessee a copy of t purchaser or lessee.				
I/We will be bound by the Declaration of Association.	of Condominium, By-Laws	, Articles of Incorporati	on and Regulations of the Condom	ninium
THE ASSOCIATION AND ITS AGEN AUTHORIZED TO ACT AS OUR AGE REQUIRED, IF NECESSARY, TO COME OF THE DECLARATION OF CONDOM SUPPORTIVE EXHIBITS, THE CONDOINSTANCE OF VIOLATION OF THE CIRCUMSTANCES, TO TERMINATE T LESSOR AGREES TO REIMBURSE THE AGENT IN SUCH ENFORCEMENT OR I	ENT WITH FULL POWER PEL COMPLIANCE BY O IINIUM OF TURNBERRY OMINIUM ACT AND RUE ABOVE BY THE LEST THE LEASEHOLD. IF THE ASSOCIATION FOR AN	R AND AUTHORIY, TO UR LESSEE (S) AND/O ON THE GREEN CON LES & REGULATIONS SSEE(S) AND/OR THE IIS APPLICATION IS I	D TAKE SUCH ACTION, AS MAR THEIR GUESTS, WITH PROVIS NOOMINIUM ASSOCIATION, INC. OF THE ASSOCIATION, OR IN GUESTS, UNDER APPROPREOR A LEASE/LEASE RENEWAL	Y BE SIONS C., ITS N THE RIATE L, THE
In order for you to facilitate consideration of caused the proposed purchaser/lessee to co- falsification or misrepresentation of the fac- or lease. Also a check to Turnberry On Th- proposed purchaser or lessee, with a comple	omplete Application for appets in the application for appet Green in the amount of \$1	proval to purchase/lease or proval will result in the au 100.00 will be provided to	or lease renewal. I/We are aware the atomatic rejection of this application of cover investigation and other costs to	nat any to sell
Unless you notify me to the contrary with Application by proposed Purchaser or Lesso of the interview to request additional inform	ee, I will advise purchaser/le			
SIGNED:Seller	Uni	it#		
SIGNED:				
Seller	DA	TE:		

Dear prospective buyer/ tenant:	
	er / landlord one or more access cards. Please be aware that isticated security system. In order to preserve integrity of the atch the records of the association.
The cards/fobs assigned to unit #	are as follows:
No other cards will be accepted or progra	mmed
I/We am/are aware and agree to the above	
Buyer / Tenant's Signature	Buyer / Tenant's Signature
Print Name	Print Name
Unit #	



# **AUTHORIZATION FORM**

### MOVE-IN / MOVE-OUT / DELIVERIES & PICK-UPS

Date				
UNIT # RESID	ENT NAME	d:		
I hereby authorize the follow completing my move.	ing moving o	company access t	to Turnberry on The Green for the purpose	of
MOVING COMPA	NY NAME:			
DATE OF MOVE:		<del></del>		
I understand and agree to the	e following:	(please initial	each item)	
I will submit this for	m to the man	agement office to	authorize access to the movers.	
I will provide the madeposit prior to the madeposit prior to the made and the made are to the made are t	-	fice with a refund	dable \$1000.00 elevator security	
			e of Liability and Workers he Green as second insured.	
The move will take no later than 5:00 p	•		of 8:30 a.m. and be concluded	
I will call the Manag to reserve the elevate	•	e at 305-466-7767	7 at least 5 days in advance	
I understand that without the	above steps	being taken the n	nove will not be permitted.	
Signature	Prin	nted Name	Date signed	
Signature	Prir	nted Name	 Date signed	

# REQUIREMENTS FOR PICK-UPS, DELIVERIES, MOVE-IN AND MOVE-OUTS, REMODELING, AND RENOVATIONS IN APARTMENTS

TO: ALL RESIDENTS

FROM: MANAGEMENT

- 1. The owner/tenant must make a reservation for the service elevator no less than 5 working days prior to the day of the delivery/job starts (in some cases it may require more time, based on the availability of the elevators).
- 2. The owner/tenant has to provide Turnberry on the Green with a security deposit in the amount of \$1000.00. The security deposit will be refunded after the job is completed and the premises is left in good (original) condition. It is the responsibility of the unit owner/tenant to make sure that all common areas of the building are left in good, clean condition, as received.
- 3. The moving/delivery/construction company has to provide the Management Office with the proper proof of insurance:
  - a. General Liability: no less than \$300,000.00
  - b. Worker's Compensation
  - c. Turnberry on the Green has to be listed as a Certificate Holder (additionally insured).

Note: See attached copy of the proper Certificate of Insurance form.

4. All renovations and/or remodeling, except for painting and carpeting, require City permits as per the City of Aventura Building Department.

It is the responsibility of the unit owner/tenant to notify their contractors/movers of the Rules and Regulations of the Association and to make sure that they will abide by its contents.



# Application for Occupancy – Unit#\_\_\_\_\_

UNIT#	LEASE		LEASE RENEWAL _	DATE
DATE OF OCCUPANCY	DESIRED:			
LAST NAME:NAME:		FIRST	NAME:	MIDDLE
DATE OF BIRTH:		SOCIAI	L SECURITY NUMBI	ER
DRIVER'S LICENSE Nu	mber and State:			
SPOUSE'S LAST NAME			FIRST NAI	ME:
DATE OF BIRTH		SOCIA	L SECURITY NUMB	ER
DRIVER'S LICENSE Nu	mber and State:			
NAMES & AGES OF CH	IILDREN (AGE	18 AND	OVER) WHO WILL	OCCUPY UNIT:
NAMES & AGES OF CH	IILDREN (UNDI	ER 18) V	WHO WILL OCCUPY	THE UNIT:
WERE YOU EVER CON	IVICTED OF AN	Y FELO	ONY OR MISDEMEA	NOR? YESNO
IF YES, EXPLAIN:				



#### **CERTIFICATE OF APPROVAL**

A Certificate of Approval with **right of residency** is issued to the buyers/tenants after they have been screened by the Screening Committee. Should the buyers not be able to attend a screening, they may be issued a Certificate of Approval *without right of residency*. Without right of residency implies that the buyers may not use the unit for their own personal use or for guests; they are only allowed to rent the unit.

Should the buyers decide that they intend to use the unit for their personal use, they will have to schedule a screening with the Board of Directors and be issued a new Certificate of Approval with right of residency.

I,	, understand this policy and agree to abide by it.
Buyer's Name	
Buyer's Signature	
Date:	
** *** *** *** *** *** *** *** *** ***	



# Residence History - Past 5 years

(Please print full address, including unit # & zip code)

Present address	City	State Zip
Phone number ( )	Dates of residency: from	to
Name of Landlord or Mortgage	e Co	
Landlord or Mortgage Co. phor	ne number ( ) Mtg. No	0
Address		
Monthly payment \$	Own or Rent	
Previous address	City	State Zip
Residing from to	Monthly payment \$	Own or Rent
Reason for leaving		
Name of Landlord or Mortgage	e Co	
Address	phon	ne number ( )
Previous address	City	State Zip
Residing from to	Monthly payment \$	Own or Rent
Reason for leaving		
Name of Landlord or Mortgage	e Co	
Address	phon	ne number ( )
(Please enclose a separate page	for additional information with residence h	istory going back 5 years.)
Unit#		
Date:		



# Employment History – Past 5 years.

Type of business / profession:				
Name of Company:				
Address		City	State	Zip
Phone Number ( )	Position			
Dates working: from	to	Salary	p	er year.
Previous Employer / Name of	f Company			
Address		City	State	Zip
Phone Number ( )	Position			
Dates working: from	to	Salary	p	er year.
Spouse's Employer / Name o	f Company			
Address		City	State	Zip
Phone Number ( )	Position			
Dates working: from	to	Salary	p	er year.
Spouse's Previous Employer	/Name of Company			
Address		City	State	Zip
Phone Number ( )	Position			
Dates working: from	to	Salary	per	year.
(Please enclose a separate	page for additional infor	mation with employm	ent history go	ing back 5 years
Unit#	-			
Date:				
Unit#	-			
Date:				

# Bank References

Bank name		Pho	one ( )	
Checking Acct. #	since	Savings Acct. #	s	ince
Address		City	State	Zip
Bank name		Pho	one ( )	
Checking Acct. #	since	Savings Acct. #	s	ince
Address		City	State	Zip
	Credit / I	Loan References		
Auto # 1–Type/Model _		License #		_ State
Financed Thru	Account #		_ Monthly payment	
Auto # 2–Type/Model _		License #		_ State
Financed Thru	Account #		_ Monthly payment	
Auto # 2–Type/Model _		License #		_ State
Financed Thru	Account #		_ Monthly payment	
Loans and Charge Acc	ounts (credit cards, depa	artment stores, etc.)		
Owed to	Acct. #	Total Debt.\$	Payments \$	per
Owed to	Acct. #	Total Debt.\$	Payments \$	per
Owed to	Acct. #	Total Debt.\$	Payments \$	per
Owed to	Acct. #	Total Debt.\$	Payments \$	per
Owed to	Acct. #	Total Debt.\$	Payments \$	per
Owed to	Acct. #	Total Debt.\$	Payments \$	per



# **Character References**

# (Relatives or realtors references will not be accepted)

Name	Phone No.	o.( )	
EMAIL ADDRESS:		_	
Address	City	_ State	Zip
Name	Phone No.	o.( )	
EMAIL ADDRESS:		_	
Address	City	_ State	Zip
Name	Phone No.	o.( )	
EMAIL ADDRESS:		-	
Address	City	_ State	Zip
Please check one of the following: Unit # will be:	mv primarv residency my	vacation l	10me
Applicant represents that all of the all information, references and credit re	bove statements are true and hereby authorizes cords. Applicant acknowledges that false informs application, termination of right of occupances	verification he	on of the above
Applicant's signature	date		
Applicant's signature	date		
Unit#			
Date:			

#### AUTHORIZATION FOR BACKGROUND CHECK

I hereby authorize Verify Screening Solutions Inc to obtain a consumer credit report and/or investigation report on myself consisting of, but not limited to, employment verification, motor vehicle records, criminal scan, credit report, bad check and driver's license verification, academic verification, worker's compensation information and drug testing for the purpose of employment with the above mentioned company. I understand that such information may be derived in whole or in part from TransUnion, V.S.S and other providers and the report may contain information on my character, general reputation, personal characteristics and mode of living. Verify Screening Solutions Inc. is the background screening company used and their privacy policy can be found on their website (www.verifyssi.com).

First Name	Middle Name	Last Name	
Home Address			
City	State	Zip	
Social Security Number	Drivers License Number and State	Date of Birth	
Position Applying For			
Signature	Date		

#### **AUTHORIZATION FOR FILE DISCLOSURE**

#### \*PLEASE ATTACH DRIVER'S LICENSE OR PHOTO ID TO THIS FORM\*

#### APPLICANT/TENANT CONSENT

I hereby consent to allow Verify Screening Solutions, Inc., through its designated agent/employee, to obtain and verify my consumer reports, including but not limited to, my credit report, criminal information, and eviction information for the purpose of determining my eligibility to lease/purchase an apartment. I further understand if I lease/purchase an apartment, I consent to allow Verify Screening Solution, Inc. and its designated agent/employee, for the duration of my lease, to review the following list of information to assess risk, for analytics, for process improvement, and other uses: my consumer reports, including but not limited to my credit report, criminal information, eviction information, my rental payment history, and occupancy history, and other information. The facts set forth in my application for residency are true and complete. False, fraudulent or misleading information on an application may be grounds for denial of residency or subsequent eviction.

X		
		Date
Full Name - First, Middle, and	Last Name (Please Print)	
Home Address (Unit # if appli	cable)	
CITY	STATE	ZIP
Social Security Number	Date of Birth	Driver's License Number and State Issued

I,		, acknowledge th	at I need to fill ou	t ar
Architectural Modification form and receive writt	en approval	from the Associat	ion before beginning	any
work in my unit, and that I must provide them wi	th permits fo	r any modification	ns done to my unit.	I am
aware that soundproofing needs to be installed for	any hard floo	r surfaces as well.	The Management O	ffice
has gone over these facts with me and I completely	understand.			
Purchaser's signature	Date			
Purchaser's signature	Date			
Tutomasor s signature	Buie			
I Init#				



# ACKNOWLEDGEMENT OF RULES & REGULATIONS AND CONDITIONS FOR USE OF THE FACILITIES OF TURNBERRY ON THE GREEN

I am/We are in receipt of the Turnberry on The Green Condominium Information Procedures and Rules & Regulations.

I/We fully acknowledge the contents of the Information Procedures and Rules & Regulations and will abide by its contents, as well as the Declaration of Condominium for Turnberry on The Green Condominium Association, its By-Laws, Articles of Incorporation and Rules and Regulations, all as may be from time to time adopted or amended.

I/We will be able to exercise my rights to use the Spa and facilities of the gym upon proving my residency by providing the Management Office with the copy of my driver's license showing my new Turnberry on the Green address.

Signature		Signature	
Name		Name	
	(Please print)		(Please print)
	Apt. #	D	ate
			(mm/dd/yy)

# Purchaser's consent to conform with rules and Regulations of Turnberry On The Green Condominium Association.

PL	EASE RETURN WITH COMPLETED APPLICATION TO PURCHASE UNIT #
	making the foregoing application, I represent to the Board of Directors of Turnberry on the Green ondominium as follows:
1)	I hereby agree for myself and on behalf of all persons who may use the apartment which I seek to purchase that I will abide by all of the restrictions contained in the By-Laws, Rules and Regulations, Association documents, and restrictions which are or may in the future be adopted or amended by
2)	Turnberry on the Green Condominium Association.  I have received a copy of all Association documents: Yes No  I have received, read, understand and agree to the Association's Rules and Regulations Yes No
3)	I understand that I will be advised by the Board of Directors of either acceptance or denial of the application. Occupancy prior to Board approval is prohibited.
<b>4</b> )	If this application is accepted, I will provide a copy of the Closing Statement and a copy of the Warranty Deed after closing.
5)	I understand that there are no pets allowed in Turnberry on the Green Condominium.
	I understand that the acceptance for purchase of an apartment at Turnberry on the Green Condominium is conditioned upon the truth and accuracy of this application and upon the approval of the Board of Directors. Any misrepresentation or falsification of the information on these forms will result in an automatic rejection of this application.
7)	I understand that the Board of Directors may initiate an investigation of my background, as the Board may deem necessary. Accordingly, I specifically authorize the Board of Directors and Management to make such investigation, and that the Board of Directors, Officers and Management 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.
As	making the foregoing application, I am aware that the decision of Turnberry on the Green Condominium sociation will be final and no reason will be given for any action taken by the Board of Directors. I agree be governed by the determination of the Board of Directors.
Sig	gnature Signature
Pr	int namePrint name



# **OWNER INFORMATION SHEET**

UNIT #	<del></del>	
Name:		
Phone:	Cell:	Work:
Email:		
Name:		
Phone:	Cell:	Work:
Email:		
Lease Start Date:		Lease End Date:
U.S. Emergency Contact	Person (s):	
Name:		Phone#
Name:		Phone#
Signature		Signature
Print Name	 Print	Name
	TO BE FILLED OUT BY	Y MANAGEMENT
_		ccupancy: Two persons per bedroom. s with Management Office personnel.
	NAMES OF LEGAL (APPRO) oand, wife and dependent childre	VED) RESIDENTS OF THE UNIT
Name	Date of Birth	

Date:

# **AUTHORIZATION TO ENTER**

UNIT #	-	Da	nte:
I,	, the und	ersigned hereby autho	orize the persons listed
below, to enter my apartment #	from	to	for the purpose
of		·	
I UNDERSTAND THAT THIS F IN THE		SITORS ONLY, NO LENGTH OF TIM	
This means when you have a visite and will be given a pass to go to			
Signature			
 Date			

# PARCEL RECEIPT AUTHORIZATION

UNIT OWNER:	
UNIT #	
GREEN CONDOMINIUM ASSOCIATION, I THE GREEN CONDOMINIUM ASSOCIATI	isted above (the "Unit") of <b>THE TURNBERRY ON THE</b> INC. hereby authorizes the personnel of <b>TURNBERRY ON</b> ON, INC. (The "Association") to accept, receive and sign for posing any liability thereon for the condition or substance of
•	ployees and agents, from any liability arising from this ability arising from the misplacement of parcels, and/or the agents in such regard.
EXECUTED THISday of	······································
SIGNATURE:	PRINT NAME:

NO PARCEL CAN BE LEFT FOR OVER 10 BUSINESS DAYS



Unit #\_\_\_\_

#### REALTOR'S INSTRUCTIONS FOR PURCHASING UNITS

- 1. Unit Owner must complete Letter of Intention to sell. Copy of Mortgage Commitment, proof of citizenship, permanent residency or visas of all prospective occupants must accompany application.
- 2. We reserve the right to request any information, which may be necessary to process the application.
- 3. Please include a copy of the last two years of income tax return, SSI (if retired), and the last two months of bank statements. (Accountant's letters will not be accepted as proof of income).
- 4. The ownership of the real state properties reflected on the financial statements must be backed up by closing statement and/or warranty deed, holdings in brokerage/bank firms by current statements.
- 5. Every potential owner of a unit, ages 18 and older, must complete an application form. A non-refundable background check fee of \$100.00 payable to Turnberry on the Green must accompany each application form with the following exceptions: a husband and wife or a parent and dependent children are considered one application for purposes of payment of this fee. The above-mentioned rule applies to primary users of a Unit purchased by a corporation. Corporate purchases require additional forms and documents.
- 6. ALL FORMS MUST BE FILLED OUT IN TOTAL WITH NO BLANK SPACES AND WITH ORIGINAL SIGNATURES, OR THE APPLICATION WILL BE RETURNED FOR COMPLETION. AN APPOINTMENT IS NECESSARY TO SUBMIT THE APPLICATION. MISSING DOCUMENTS AND/OR INFORMATION WILL CAUSE DELAYS AND THE APPLICATION WILL NOT BE PROCESSED.
- 7. Character references provided by the Realtor handling the application, by applicant's relatives or by the seller, will not be accepted. An interview with all prospective occupants, ages 16 and older, in presence, is required and should be requested at least 30 DAYS in advance of the closing (sale) or occupancy (rental). All applicants must present original picture ID to the office on the date of the interview. Our office will notify applicants as of the date and the time of the interview. After the interview, it may take from 3 to 20 days for Board's review and approval. We are requesting all realtors and agents to adhere to this policy without exception.
- 8. A Warranty Deed and Closing Statement must be given to the Association's Management Office before the final authorization to "Move into Unit" form is issued.
- 9. It is the Realtor's responsibility to show the prospective occupant all Common Areas of Turnberry on the Green (pool and barbecue area, parking garage, storage bin area, mail room, etc.)
- 10. It is the Realtor's responsibility to see that the seller provides the new owner or tenant with access cards, and keys to the apartment, storage bin, and mailbox.

**LEGIBLE AND EXECUTED** copy of sale contract with both parties' signatures to be presented for review to the Management Office before any further processing. **Please attach selling agent's business card.** 

No contracts with assignees will be accepted

# AN APPOINTMENT FOR AN INTERVIEW IS MANDATORY. NO ONE WILL BE PERMITTED ENTRY TO THE BUILDING- APARTMENT PRIOR TO APPROVAL

Thank you for your cooperation.

Agent:			
J	Signature	Phone number	Date
	Print name		

UNIT #	PER	SONAL F	INANCIA	L STATEMENT			
				Statement Date:			_
Individual - provide financial information only about yourself  Joint - provide financial information about							
yourself and other person							
Name			Birth Date		-		
Name			Birth Date		Relation	onship	
Address							
Home Phone #			No. of Dep	endents			
Business or Occupation			Bus. Phone	e#			
Г	l	T	T			I	1
Assets	Mill	Thous	Hundred	Liabilities	Mill	Thous	Hundred
1 Cash in Banks				21 Notes Due to Banks			
2 Cash Value of Life Insurance				22 Notes Due to Others			
3 U.S. Gov. Securities				23 Accounts & Bills Payable			
4 Other Marketable Securities				24 Loans on Life Ins. Policies			
5 Notes & Accounts Receivable				25 Liens & Assessments Payable			
6 Other assets readily convertible to cash				26			
7				27			
8				28			
9				29			
10 TOTAL CURRENT ASSETS				30			
11 Real Estate Owned				31			
12 Mortgages & Contracts Owned				32 TOTAL CURRENT LIABILITIES			
13 Other Securities - not readily marketable				33 Real Estate Mortgages Payable			
14 Other Assets- Itemize				34			
15				35			
16				36			
17				37			
18				38 TOTAL LIABILITIES			
19				39			
20 TOTAL ASSETS				40 Net worth (Total Asset minus Liabilities)			
20 70 772 7802 70							
Please circle one	I	GENER	AL INFORM	ATION	I		
Are any assets pledged? YES NO							
Are you a defendant in any Suits or Legal Actions?	YES	s NO					
Have you ever made a composition settlement with o			NO				
Have you ever been declared Bankrupt? YES	NC		110				
If yes, explain:							
, 55, 50pm							
Date Signed:	Signa	iture:			SS#:		
Date Signed:	Signa				SS#:		

NOTE: CORRESPONDING BACK-UP DOCUMENTS MUST BE PROVIDED FOR THE ITEMS LISTED ABOVE.

#### CAR/MOTORCYCLE REGISTRATION FORM

UNIT #															<b>D</b> A	ATE		
UNIT RESIDENT NAMI	Ξ:																	
PHONE NUMBER:								CE	LL:									
E-mail: <b>◇ ◇ ◇ ◇ ◇</b> ◆	<b>♦ ♦</b>	<b>\$</b>	<b>♦</b>	<b>\$</b>	<b>-</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>										
VEHICLE 1 – SPACE A	SSIGNN	1ENT	Γ:															
VEHICLE OWNER:										PHO	ONE	/CEI	L: _					
VEHICLE VIN #:									IN	ISUF	RAN	CE C	:O.: _					
MAKE:			_ N	IODI	EL:							_YE	AR:					
COLOR:	_ TAG	r:							STA	ATE:	:		_					
<b> </b>	<b>\$</b> \$	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>													
VEHICLE 2 – SPACE A	SSIGNN	1ENT	Γ:															
VEHICLE OWNER:										PHO	ONE	/CEI	L: _					
VEHICLE VIN #:																		
 MAKE:																		
COLOR:																		
♦ ♦ ♦ ♦ ♦ ♦														•	•	^	^	•
							V	<b>V</b>	<b>V</b>	<b>V</b>	V	V	V	V	<b>V</b>	<b>V</b>	<b>V</b>	<b>V</b>
VEHICLE 3 – SPACE A	ASSIGNN	1ENT	Γ:															
VEHICLE OWNER:										PHO	ONE	/CEI	L: _					
VEHICLE VIN #:									IN	ISUR	RAN	CE C	:O.: _					
				, o D 1	DI.							VE	AD.					
MAKE:			_ N	IODI	CL:							_ 1 L	AK.					

NOTE: A copy of the registration and insurance for each vehicle must be attached to this form. The office will provide a sticker for each vehicle.

Unregistered vehicles will be towed at owner's expense.

#### DIRECT DEBIT PAYMENT PLAN

Turnberry on the Green, through our City National Bank relationship, can now offer you direct debit payment of your maintenance fees at no cost to you.

Simply complete this application form, attach a VOID copy of your check, and mail or drop the form off at the Management Office.

Direct Debit authorizations received after the 5th of the month will be debited to your account the following month. You are responsible for making the payment for the current month's payment.

Owner's name			
Unit number			
Name of your bank			
Name on bank accou	nt		
Please check one	Checking	Savings	
	nine (9) digits preceding		
Account number			
Signature			
Print name			
Date			

19501 WEST COUNTRY CLUB DRIVE, AVENTURA, FLORIDA 33180 305.466.7767 ° FAX 305.466.7741

# MAINTENANCE PAYMENT REQUIREMENTS

The maintenance payment for Unit #_	is \$	·*				
All payments are to be made payable to	o Turnberry on the Green	Condominium				
Association, Inc. and sent to the Man	agement Office at 19501	West Country				
Club Drive, Aventura, FL 33180, by the	te 1st of every month.					
A \$25.00 late fee will be applied if payment is not received by the 10th day of the						
mo	onth.					
Please note that the Associat	Please note that the Association does not provide coupons					
and/or month	and/or monthly statements.					
WE STRONGLY RECOMMEND T	HAT YOU USE OUR DIRE	CT DEBIT				
PRO	GRAM.					
Name						
Signature						
Date:						
Unit#:						

# RELEASE OF LIABLITY OF THE ASSOCIATION FOR PERSONAL ENVELOPES AND PACKAGES DROPPED-OFF AT THE FRONT DESK

OCCUPANT(S):	
UNIT#:	
GREEN CONDOMINIUM ASSOCIATION, THE GREEN CONDOMINIUM ASSOCIA	Unit listed above (the "Unit") of TURNBERRY ON THE INC. hereby authorizes the personnel of TURNBERRY ON ATION, INC. (The "Association") to accept and receive t, without imposing any liability thereon for the condition or red.
Authorization, including, without limitati	inployees and agents from the liability arising from this on, liability arising from the misplacement of the egligence of the Association, its employees or agents in such
EXECUTED THIS DAY OF	
SIGNATURE:	PRINT NAME:

NO PARCEL/ENVELOPE CAN BE LEFT FOR OVER 10 BUSINESS DAYS

PACKAGES LEFT AT THE FRONT DESK ARE NOT TO EXCEED 2 POUNDS



#### FREQUENTLY ASKED QUESTIONS

Q: What are my voting rights in the Condominium?

A: The owner or owners of each Unit are collectively entitled to one vote as a member of the Condominium Association with respect to matters requiring or permitting the vote of Unit Owners, which vote shall be cast in accordance with the articles and By-Laws. All votes have equal weight in deciding issues.

Q: What restrictions exist in the condominium documents on my rights to use my unit?

A: There are restrictions on pets, nuisances, and related matters, parking and alterations and improvements. For these and other restrictions refer to Paragraph 17 of the Declaration of Condominium Property, the Section entitled "Occupancy and Use Restrictions" and Rules and Regulations.

Q: What restrictions exist in the condominium documents on the leasing of my unit?

A: There are restrictions on the leasing of your Unit. You may not rent your Unit more than twice during any twelve month period and no rental shall be for less than six months. The Condominium Association has the right to approve or disapprove all rentals. A written lease shall be required for each tenant.

Q: How much are my assessments to the Condominium Association for my unit type and when are they due?

A: Your assessments for Turnberry on the Green Condominium Association, Inc. are specified on the budget and are available in the Management Office.

Q: Am I required to pay rent or land use fees for recreational or other commonly used facilities? IF so, how much am I obligated to pay annually?

A: No, however, it may change in the future.

Q: Is the Condominium Association involved in any court cases in which it may have a liability in excess of \$100,000? If so, identify each such case.

A: No.

NOTE: THE STATEMENTS CONTAINED HEREIN ARE ONLY SUMMARY IN NATURE. A PROSPECTIVE PURCHASER SHOULD REFER TO ALL REFERENCES, EXHIBITS HERETO, THE SALES CONTRACT, AND THE CONDOMINIUM DOCUMENTS.

### When you need to have work done inside your unit.....

#### ATTENTION RESIDENTS

Please be advised that any work in your unit, including but not limited to moving in/out, repairs, and maintenance or construction work, requires vendors, movers and/or contractors to be licensed and insured.

The work must be scheduled and the following must be on file with the office, before any work can be started:

- 1. A Certificate of Insurance for General Liability (minimum coverage of \$300.000), naming Turnberry on The Green, Condominium Association, Inc. as a Certificate Holder. The certificate must also show Worker's Compensation coverage or a copy of an Exemption Certificate issued by the State of Florida, must be supplied.
- 2. Copy of contractor's license.
- 3. Copy of City/County permits, **if required by the City of Aventura.** (i.e.: hard floor installation, etc.)
- 4. Company's letter head with the list of names of workers entering the building under the company's responsibility.
- 5. Unit Access Authorization form, signed by the unit owner/resident, for contractors to be authorized to enter the unit during their absence (office will not provide apt. keys).

### Cuando necesite hacer algún tipo de trabajo en su apto.....

#### ATENCION RESIDENTES

Toda persona o compañía que vaya a realizar algún tipo de trabajo dentro de su apartamento, bien sea de mantenimiento, reparación, construcción, mudanza, etc., deberá suministrar a la oficina de administración los siguientes documentos:

- 1. El certificado de seguro de responsabilidad legal (Insurance for General Liability) (cobertura mínima de \$300,000), nombrando a Turnberry On The Green Condominium Association, Inc., titular del certificado (Certificate Holder). El certificado también debe mostrar el seguro de indemnización de trabajadores (Worker's Compensation) o en su defecto, se debe presentar la copia del certificado de exención (Exemption Certificate), expedido por el Estado de la Florida.
- 2. Copia de la licencia de contratista con fecha vigente.
- 3. Copia del permiso de la ciudad. **Solamente si es requerido por la ciudad de Aventura**. (Ej.: instalación de pisos de mármol, madera, etc.)
- 4. Carta en papel membrete de la compañía con los nombres de los trabajadores que van a entrar al edificio bajo su responsabilidad.
- 5. Formato de autorización de entrada al apto., firmado por el dueño/residente del apto., autorizando a la compañía y sus empleados a entrar a su apto. durante su ausencia (la oficina no proveerá llaves de entrada a los aptos.).