

APPLICATION AND SCREENING INFORMATION

IMPORTANT – Previous versions will not be accepted

Community: **Paradise Pines Condominium Association** 20300 Leonard Road, Lutz, FL 33558

Lessee/Purchaser Name (s) _____ Phone# _____

Lot # _____ (check one) Purchase _____ or Lease _____ Lease Date Term: _____ to _____

The following information must be submitted with your Application.

- **Check Made Payable to Paradise Pines Condominium Association for \$35 (per individual) for a U.S. or Canadian search.**
- **Check Made Payable to Vanguard Management Group for \$15 per application**
 - This payment is **non-refundable!** Any returned or stop payment checks will be liable for a **\$25 return check fee.**
 - **Rush Fee** is an extra \$35.00 per individual, made payable to **Vanguard Management Group**. This guarantees that a completed screening application received during normal business hours Monday through Friday, will be **submitted to the board of directors within 24 hours.** (see below for Board qualification information)
 - Send application and payment to: Vanguard Management Group, 9300 N. 16th St., Tampa FL 33612
- **If US citizen, must provide:**
 - **A copy of a Driver's License or Passport (picture must be recognizable)**
 - **Copy of SS card or a like item pre-printed with your SS# (like a W2)**
- **If Canadian citizen, must provide:**
 - **Driver's License**
 - **Current street address, City and Province**
- **RV Registration and Pictures**
 - All RVs entering Paradise Pines RV Park must be in good condition. All body work must be clean and in good repair. The RV must be free from damage, rust, mold and dirt. All awnings and equipment must be well maintained without any visible damage. To avoid any misunderstanding or misrepresentation, **(4) CURRENT** photographs are to be submitted with the application, to be reviewed by the Board of Directors or the association property manager. Photographs must be taken from the front, back, left and right and clearly show current vehicle licensing. **Any RV that fails to meet these standards as defined by the Board of Directors may be refused entry.**
- This Association has restrictions that may affect your lifestyle. It is up to you to ask questions and become familiar with the Association's documents and rules. Restrictions include, but are not limited to:
 - **2 pets per lot.**
 - Residents are required to **practice Nudism.** All residents must be a member of **AANR** or **other recognized nudist organization.**
 - **NO Storage** of personal items **outside your unit**
 - **No felonies or sexual assault charges**
 - **If you have any questions, ask prior to paying any fees.**
- *****The Board has 15 days to qualify your transfer prior to you moving in. Moving in prior to qualifying may invoke a fine. In addition, a fine of no more than \$100 a day, or a max \$1000 may be assessed for moving in prior to providing the association with a complete, truthful, signed application, payment all fees. Fines may also be imposed for other violations of the governing documents. The Board has 3 days to qualify transfers from applicants that have paid rush fees.**

The 15 days(3 days for rushes) does not begin until the Association has received:

 - A completed application on each couple or individual over 18 years of age
 - A screening fee for each applicant/couple required to provide one. Fees are above.
 - **Incomplete applications, applications without fees, and fees without applications, will be mailed back to the applicant and the applicant will be notified by email.**

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“I hereby authorize **Paradise Pines Condominium Association** to obtain a consumer report and any other information it deems necessary, for the purpose of evaluating my application. I understand that such information may include, but is not limited to, civil and criminal information, records of arrest, rental history with respect to behavior and timely payment of rents, employment and/or salary details, vehicle records, licensing records, and/or other necessary information.

“I hereby expressly release: Paradise Pines Condominium Association; and any procurer or furnisher of information, from any liability what-so-ever in the use, procurement, or furnishing of such information, and understand that my information may be provided to various local, state, and/or federal government agencies, including without limitations, various law enforcement agencies.”

APPLICANT #1 NAME _____ ACTIVE MILITARY? _____

APPLICANT'S EMAIL ADDRESS: _____

SIGNATURE APPLICANT #1 _____

APPLICANT #2 NAME _____ ACTIVE MILITARY? _____

APPLICANT'S EMAIL ADDRESS: _____

SIGNATURE APPLICANT #2 _____

Every line requires a response. Put "N/A" if a line does not apply. IF MARRIED: SPOUSE INFORMATION IS REQUIRED.

Name of the Community: **Paradise Pines Condominium Association.** PURCHASE _____ OR LEASE _____
please check one

PPVRP Unit Number you are leasing or buying _____

PPRVP Unit Seller/Lessor Name and Phone Number _____

APPLICANT #1 PERMANENT ADDRESS _____

HOME PHONE # _____ MOBILE # _____ EMAIL _____

DOB _____ DRIVER'S LICENSE # & STATE _____

APPLICANT #2 PERMANENT ADDRESS _____

HOME PHONE # _____ MOBILE # _____ EMAIL _____

DOB _____ DRIVER'S LICENSE # & STATE _____

CHECK, CASHIER CHECK or MONEY ORDER # _____

FOR LEASES ONLY, LEASE TERM: From _____ To _____

Any children occupants/NAMES/DOB _____

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1. Contact the owner of the lot to be rented
2. Negotiate a lease with the owner
3. Lot Number
Term of lease: Months From: to
4. Print and sign screening application
5. Submit to owner a copy of application AND:
 - Signed screening application
 - Check for \$35.00 per individual, payable to Paradise Pines Condominium Association for Application
 - Check payable to Vanguard Management Group \$35 per individual, only if paying for RUSH FEE
 - Check for \$15.00 per application
 - Copy of Driver's License for each applicant
 - Copy of AANR, TNS, CFN, or INF card for each applicant
 - Copy of RV and vehicle (car or truck) registration
 - Pictures of RV – 4 Photographs must be taken from the front, back, left and right and clearly show current vehicle licensing.
 - Copy of proof of insurance of ALL vehicles
 - Number of Pets and copy of proof of vaccinations for each pet
 - Mailed to owner

When the seller/lessor receives ALL the above information, please send to:

Vanguard Management Group
9300 N. 16th St.
Tampa, FL. 33612

If you have any questions, on the application process or want confirmation of receipt for your application, please email denise@vanguardmanagementgroup.com. All other questions, please call or email Alice Kuhn at: alice@vanguardmanagementgroup.com, 813-955-4642.

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Social Nudism Questionnaire

LOT # _____

APPLICANT #1 NAME _____

Nudist Organization Membership _____

Prior Social Nudist Experience

Resorts: _____

Beaches: _____

Clubs/landed or non-landed _____

How did you learn about Social Nudism? _____

When was your first Social Nudism experience and how often do you practice Social Nudism?

What do you expect to gain from practicing Social Nudism? _____

APPLICANT #2 NAME _____

Nudist Organization Membership _____

Prior Social Nudist Experience

Resorts: _____

Beaches: _____

Clubs/landed or non-landed _____

How did you learn about Social Nudism? _____

When was your first Social Nudism experience and how often do you practice Social Nudism?

What do you expect to gain from practicing Social Nudism? _____

APPLICANT #1 SIGNATURE & DATE _____

APPLICANT #2 SIGNATURE & DATE _____

HOME PHONE # _____ **MOBILE #** _____ **EMAIL** _____

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Pet Registration

Please provide the following information about all animals that will be living in your home. As a property owner, you are required to have all animals licensed and vaccinated on an annual basis and be registered with the Association. All animals (including cats) must be on a leash and you are responsible for cleaning up after them when off your property. Please check the line & return this form even if you do not have any animals. **ONLY 2 PETS ALLOWED PER LOT**

Dog/Cat _____ Breed: _____

Male _____ Female _____ Approx. Age: _____ Microchipped: Yes _____ No _____

License Number: _____ copy enclosed

Color of Animal and Distinguishing Marks: _____

Dog/Cat _____ Breed: _____

Male _____ Female _____ Approx. Age: _____ Microchipped: Yes _____ No _____

License Number: _____ copy enclosed

Color of Animal and Distinguishing Marks: _____

____ **I DO NOT OWN ANY CATS OR DOGS.**

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VEHICLE REGISTRATION FORM – Fill out every line, N/A if non-applicable

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VEHICLE #1 MAKE & MODEL _____ LICENSE # _____

COLOR _____ YEAR _____ STATE/PROVINCE _____

INSURANCE COMPANY & POLICY # _____

VEHICLE #2 MAKE & MODEL _____ LICENSE # _____

COLOR _____ YEAR _____ STATE/PROVINCE _____

INSURANCE COMPANY & POLICY # _____

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RV information: A copy of registration is required to be submitted with application.

(check one) Motorhome _____ 5th Wheel _____ Travel Trailer _____ Park Trailer _____ Park Model _____

Make _____ Model _____ Year _____ License # _____ State/Province _____

INSURANCE COMPANY AND POLICY # _____

COMMENTS:

APPLICANT #1 SIGNATURE & DATE _____

APPLICANT #2 SIGNATURE & DATE _____

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Lease Approval Form

Lease Affidavit

My signature below indicates that I have read and understand and agree to abide by the rules and regulations of the Condominium Association. Failure to abide by the rules, including, but not limited to practicing social nudism may result in refusal of future renewal of any lease. I further acknowledge that false information herein may constitute grounds for rejection of this application, termination of right of occupancy and may constitute a criminal offence under the laws of the State of Florida. I attest that all information provided is accurate and that I fully understand the terms of this lease.

TERM OF LEASE: _____ to _____

Printed Name of Applicant #1

Printed Name of Applicant #2

Signature

Signature

Date _____

Date _____

Owner Affidavit

I have read the above information and completed the form regarding the lease/tenants as of this date. I understand and agree to comply with the Association restrictions. I further agree to provide the tenant(s) with a copy of Paradise Pines Rules for their information and use. I understand that any violations by the tenant(s) will be the responsibility of the owner and by signing below, declare knowledge of this responsibility.

Printed Name of Lessor

Printed Name of Lessor

Signature

Signature

Date _____

Dated _____

For Office Use Only

Signature of Property Manager

approved/not approved _____
(circle one)

Date _____

