

BRITTANY LAKES AT ABERDEEN ASSOCIATION, INC.

c/o Davenport Professional Property Management, LLC

6620 Lake Worth Road, Suite F

Lake Worth, FL. 33467

Telephone: (561) 642-5080 Fax: (561) 642-5481

Email: info@davenportpro.net

APPLICATION FOR OCCUPANCY

_____ SALE _____ LEASE

Applications may take up to 30 days for processing.

The Association requires all prospective buyers or tenants to submit a completed application and have an orientation with the management company prior to occupancy. The Rules and Regulations of the community will be reviewed with the prospective buyer or tenant and questions may be asked regarding the Association and its facilities. Failure to comply may result in your application being declined. Failure to comply with the Rules and Regulations of the community will result in legal action by the Association’s Attorney.

All prospective buyers and tenants must complete the Association’s Application for Occupancy and submit it to the management company with the following documents:

- Clear copy of valid identification card and/or driver’s license for ALL residents 18 years of age and older.
- Clear copy of current vehicle registration for each vehicle.
- Color photo of pet(s), vaccination records, and pet license(s).
- Copy of Purchase Contract or Lease Agreement.
- Application Fees (see Application Fee Guidelines)
- Proof of membership to Aberdeen Country Club (Purchases only).

Your application will be returned as “incomplete” if any of the above referenced documents are missing.

BE ADVISED A CRIMINAL BACKGROUND CHECK & CREDIT CHECK WILL BE CARRIED OUT ON ALL APPLICANTS

Statute 83.683: If you are a service member, as defined in s. 250.01, the Association is required to provide you with an approval or denial in writing and is required to provide a reason if your application is denied. This approval or denial must be provided within 7 days, or the application is deemed to be approved if all other terms of the application and lease are complied with.

Service member is defined as: Full-time duty in active military service of the United States. The term includes federal duty such as full-time training, annual training, and attendance while a person is in active military service or in a school designated as a service school by law or by the secretary of the applicable military department. The term does not mean full-time duty in the National Guard. This term shall also include the period during which a person in the active military service is absent from duty as a result of illness, being wounded, being on leave, or other lawful cause.

Are you an active service member? _____ **Yes** _____ **No** ***Initial here:*** _____

APPLICATION FEE PAYMENT GUIDELINES

1. **\$220.00 non-refundable application fee payable to Davenport Professional Property Management, LLC**, per person 18 years of age and older, unless a married couple with same last name. ***NOTE:*** If married with different last names, a copy of the marriage certificate will be required. The application fee does not guarantee an approval. **If Applicant is not approved by the Association, the application fee is NOT REFUNDABLE.**
2. **\$45.00 non-refundable charge for a criminal background check and \$25.00 non-refundable charge for a credit check, a total of \$70.00, payable to Davenport Professional Property Management, LLC**, per person, 18 years of age and older.
3. **\$80.00 Non-Refundable Application Fee payable to Brittany Lakes at Aberdeen Association, Inc.**

Pay your application fees online with a **Credit Card, Debit Card, eCheck or PayPal** by visiting our website, www.davenportpro.net. Click on “Payments”, “Application Fees”, then “Create your account”.

NOTE: Please provide proof of payment along with your application. Personal checks are not accepted.

Note for Purchases: A Capital Contribution payment in the amount of \$1000.00 will be **due at closing, made payable to Brittany Lakes at Aberdeen Association, Inc.**

Please mail or hand deliver the original completed application packet to:

**Davenport Professional Property Management, LLC
6620 Lake Worth Road
Suite F
Lake Worth, FL 33467**

(Located on the southwest corner of Lake Worth and Jog Road, next to the Red Lobster restaurant)

Association specific information:

- Aberdeen Golf & Country Club requires **mandatory membership for all owners**. For more information, please contact them at 561-738-4903
- No person nineteen years of age or younger shall reside in any unit
- Maximum Occupancy – 2 people per bedroom
- This is a **55 and over community**
- **NO MOTORCYCLES**
- 2 Pets per unit
- No Pit bulls

BRITTANY LAKES AT ABERDEEN ASSOCIATION, INC.

APPLICATION COVER SHEET

Property Address: _____ Move in Date: _____

Current Owner's Contact Information:

Name: _____ Phone: _____

Realtor's Name: _____ Phone: _____

Realtor's Email: _____

Applicant's Contact Information:

Name: _____ Phone: _____

Email: _____

Name: _____ Phone: _____

Email: _____

Realtor's Name: _____ Phone: _____

Realtor's Email: _____

Office Use Only:

_____ Fully Completed Application

_____ Proof of Membership to Aberdeen Country Club (Purchases only)

_____ Copy of Purchase Contract or Lease (Fully Executed)

_____ Clear copy of current Driver's License

_____ Clear copy of current Vehicle Registration for each vehicle

_____ Color photo and pet license for each pet

_____ Owner's Ledger (Davenport provides this)

_____ Background & Credit Check (Davenport orders this)

_____ Non-refundable application fee - Davenport Professional Property Management, LLC.

_____ Non-refundable application fee – Brittany Lakes at Aberdeen Association, Inc.

_____ Non-refundable Criminal Background Check & Credit Check Fee

_____ Capital Contribution

BRITTANY LAKES AT ABERDEEN ASSOCIATION, INC.

APPLICATION FOR OCCUPANCY

Please complete all questions and fill in all of the blanks. If the application is incomplete, this may result in your application not being processed and/or approved.

Address of Property to Lease or Purchase: _____

Closing Date or Lease Term: _____

1. Applicant's Name: _____

Applicant's Name: _____

2. Your place of residence for the last two (2) years. If additional space is needed, please attach a separate page.

Present Address: _____ Phone: _____

Residency Dates From: _____ to _____ Cell: _____

Name of Landlord: _____ Rent Amt: _____

Previous Address: _____ Phone: _____

Residency Dates From: _____ to _____ Cell: _____

Name of Landlord: _____ Rent Amt: _____

3. Please list the full name, social security number, and date of birth for **all applicants** who will reside at this residence. Attach a separate page, if necessary.

Full Name	Social Security Number	Date of Birth	Relationship
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. Please list the year, make, model, color, and tag number for all automobiles that will be parked at this residence. **Attach a copy of the current vehicle registration for each vehicle.**

Year _____ Make _____ Model _____ Color _____ Tag No. _____

Year _____ Make _____ Model _____ Color _____ Tag No. _____

Year _____ Make _____ Model _____ Color _____ Tag No. _____

Year _____ Make _____ Model _____ Color _____ Tag No. _____

5. Print the Driver's License number or identification card number below for ALL drivers in the household.
Attach a copy of the Driver's License or ID card for each person.

1. _____ 2. _____

3. _____ 4. _____

6. Has anyone in your household been convicted of a felony in the past 5 years? If yes, please explain below.
Attach a separate page if additional space is required. **If not applicable, please write N/A.**

7. Please list employment history for the last (2) two years.

Applicant - Current Employer: _____ Phone: _____

Address: _____

How Long: _____ Position: _____ Annual Income: _____

Previous Employer: _____ Phone: _____

Address: _____

How Long: _____ Position: _____ Annual Income: _____

Applicant - Current Employer: _____ Phone: _____

Address: _____

How Long: _____ Position: _____ Annual Income: _____

Previous Employer: _____ Phone: _____

Address: _____

How Long: _____ Position: _____ Annual Income: _____

8. In case of an emergency, list a contact person below.

Name: _____ Relationship: _____

Address: _____ Phone # _____

9. Do you receive any housing assistance? _____ If yes, please explain: _____

Character References (Do not list family members). Must include complete address.

1. Name: _____ Home Phone: _____ Work # _____
Address: _____ Occupation: _____

2. Name: _____ Home Phone: _____ Work # _____
Address: _____ Occupation: _____

3. Name: _____ Home Phone: _____ Work # _____
Address: _____ Occupation: _____

Pet Registration Information (If you do not have a pet, please write “N/A” and sign below).

Please provide a color photo of pet(s), vaccination records, and your pet’s license.

If your pet does not have a pet license, you must apply for one at www.petparentusa.com

Note:

- **2 pets per unit**
- No pit bulls

Pet 1: Type of Pet: Dog / Cat / Bird / Other (specify): _____

Pet’s Name: _____ Pet’s Age: _____ Pet’s Weight: _____ Pet’s Lic. /Tag #: _____

I/We state that this pet will not exceed the weight of _____ lbs.

Pet 2: Type of Pet: Dog / Cat / Bird / Other (specify): _____

Pet’s Name: _____ Pet’s Age: _____ Pet’s Weight: _____ Pet’s Lic. /Tag #: _____

I/We state that this pet will not exceed the weight of _____ lbs.

I am aware of the **BRITTANY LAKES AT ABERDEEN ASSOCIATION, INC.** Rules and Regulations and Restrictions regarding pets on the property and agree to abide by them.

If Owner rents out his home, the Owner will be held responsible for their tenants abiding by all Rules and Regulations of the Association, as well as the pet restrictions.

If this application is NOT legible or is not completely and accurately filled out, **BRITTANY LAKES AT ABERDEEN ASSOCIATION, INC.** will not be liable or responsible for any inaccurate information in the investigation and related report caused by such omission or illegibility.

By signing, the applicant recognizes that **BRITTANY LAKES AT ABERDEEN ASSOCIATION, INC.** or their agent may investigate the information provided by the applicant and a full disclosure or pertinent facts may be made to the Association.

Applicant’s Signature: _____ Date: _____

Applicant's Signature: _____ Date: _____

**FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE
RESIDENT HAVING TO IMMEDIATELY REMOVE THE ILLEGAL PET**

BRITTANY LAKES AT ABERDEEN ASSOCIATION, INC.

Release of Information & Authorization

Date: _____

To: Davenport Professional Property Management, LLC
6620 Lake Worth Rd., Suite F
Lake Worth, FL 33467

cc: Board of Directors

I GIVE MY AUTHORIZATION FOR THE ABOVE TO VERIFY INFORMATION, OBTAIN A CREDIT REPORT, CRIMINAL HISTORY REPORT, AND EMPLOYMENT INFORMATION ON MYSELF AND AGREE SCREENING MAY RESULT IN MY APPLICATION BEING APPROVED OR DISAPPROVED AND FOR PARKING DECALS BEING APPROVED OR DISAPPROVED. THIS AUTHORIZATION IS GOOD FOR THIRTY (30) DAYS FROM THE DATE ABOVE. ANY INFORMATION OBTAINED IN A CREDIT REPORT, CRIMINAL HISTORY REPORT AND EMPLOYMENT MAY BE PROVIDED TO THE OWNER OF THE PROPERTY STATED ON THIS APPLICATION.

Signature: _____ Print Name: _____

Date of Birth: _____ Social Security Number: _____

Driver's License Number: _____ State: _____

Current Address: _____

Previous address if less than five (5) years at the above address:

Please provide an email:

BRITTANY LAKES AT ABERDEEN ASSOCIATION, INC.

Release of Information & Authorization

Date: _____

To: Davenport Professional Property Management, LLC
6620 Lake Worth Rd., Suite F
Lake Worth, FL 33467

cc: Board of Directors

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Signature: _____ Print Name: _____

Date of Birth: _____ Social Security Number: _____

Driver's License Number: _____ State: _____

Current Address:

Previous address if less than five (5) years at the above address:

Please provide an email:

BRITTANY LAKES AT ABERDEEN ASSOCIATION, INC.

PERMANENT VISITOR INFORMATION

The purpose of this form is to provide information pertaining to visitors to your residence who will be granted access through the gate without a call being placed to your home. This could include visitors such as family members, friends, healthcare employees, and services such as pest control, cleaning, pool maintenance, etc. Only place individuals on this list that you wish to have access granted on a 24/7 basis. Please complete this form and turn it in to the homeowner's association. If you wish to change any information, please complete a new form obtainable from your HOA and submit it to the homeowner's association.

RESIDENT INFORMATION

Name: _____

Address: _____

Primary Contact #: _____ Secondary Contact #: _____

Additional Phone #: _____ Additional Phone #: _____

PERMANENT VISITOR INFORMATION

Permanent Visitors:

1) _____

2) _____

3) _____

4) _____

5) _____

6) _____

Service Companies/Healthcare Employees:

1) _____

2) _____

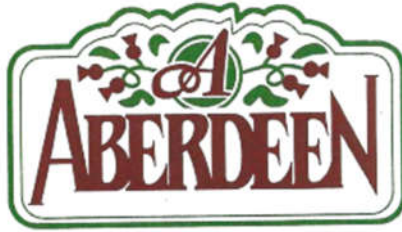
3) _____

4) _____

Resident Name: _____ Date: _____

Address: _____

Resident Signature: _____



PROPERTY OWNERS ASSOCIATION

COMCAST REQUEST FOR SERVICE CHANGE

HOA- Use this form and procedure to request a change in service or new service under the COMCAST BULK CONTRACT FOR ABERDEEN POA.

NEW HOMEOWNERS- Must fill out and return this form to **CAMPBELL PROPERTY MANAGEMENT** prior to closing date.

CURRENT HOMEOWNERS-

Downgrade in service is **NOT** permitted.

Upgrades are permitted once a year-forms must be turned in by **November 1st** on any year.

TENANTS- No changes are permitted by tenants. Only homeowners can request upgrade of service.

A tenant may order retail services from providers (Comcast, AT&T, etc.) at their own expense, outside of the Aberdeen Bulk Comcast Contract.

INSTALLATION- To have equipment installed or receive a local phone number, you need to personally contact Comcast Bulk Contract Department at 1-800-934-6489. Comcast may charge an installation fee with is the homeowner’s responsibility to pay.

PLEASE NOTE: Current homeowners are only permitted to upgrade once a year. No downgrading is permitted. New homeowners can choose either video only or triple play.

REQUEST FOR CHANGE OF SERVICE

This form must be submitted to **Campbell Property Management** by November1st for upgrades

NEW HOMEOWNERS- VIDEO ONLY _____ TRIPLE PLAY _____ CLOSING DATE _____
new homeowners must include closing date

CURRENT HOMEOWNER UPGRADE- ONLY UPGRADE TO TRIPLE PLAY IS PERMITTED _____

Name of Homeowner: _____

Address: _____

Phone #: _____ Village: _____

Signature: _____ Date: _____