



## **DOCUMENTATION REQUIRED FOR A PURCHASE AT CRTE**

**All applicable documentation on this checklist must be provided** to the Coral Ridge Towers East management office for review.

**An incomplete package will not be processed.**

- You may drop the completed package off at the management office.
- E-mail all documents to: [asstmgr.crte@gmail.com](mailto:asstmgr.crte@gmail.com)
- Mail it to:  
Coral Ridge Towers East  
3300 N.E. 36<sup>th</sup> Street, Ft. Lauderdale, FL 33308
- Fax # 954-537-9105

Once the background screening and documentation review is completed we will contact you to schedule an in-person orientation appointment. They are conducted on the first and third Wednesday of every month at Coral Ridge Towers East.



## Your Checklist

For the Background Search: Only U.S. Check or money orders are accepted.

- **U.S.** – a \$100 check made payable to CRTE for each applicant or \$100 per married couple.
  
- A valid legal government issued picture I.D. for each applicant.
- Application for Purchase (2 pages)
- Application for Occupancy (2 pages)
- Disclosure & Authorization for Consumer Reports (credit/background)
- Request for Verification of Income (1 page)
- Submit a copy of your last 2 years completed tax returns.
  
- All supporting financial documents:
  - Last 3 months – Most recent consecutive bank statements (all pages)
  - Rental agreements and leases if applicable
  - Proof of income from all sources (W-2, Social Security, Rental Income, Real Estate Income and Interest, Disability)
  - IRA's, 401K (all investment account documentation)
  - Proof of Funds Letter from a Financial Institution and other financial documents that will substantiate financial stability.
  
- Contact/Emergency Information Form
- Acknowledgement/Affirmation of No Pet Rule/Rules We Live By and CRTE Parking Rules.



APPLICATION FOR PURCHASE

This application and the Application for Occupancy must be completed by the proposed Purchaser(s). All applicants must be present for a personal interview by the Board of Directors prior to purchase. Children under the age of 18 are not permitted as permanent occupants. No pets are permitted on premises.

**For U.S. Applicants** – Please attach a processing fee of \$100.00 for each applicant or \$100.00 for each married couple

PLEASE PRINT LEGIBLY

CTRE Apt. # \_\_\_\_\_ Anticipated Closing Date \_\_\_\_\_

SELLER NAME(S) \_\_\_\_\_ Telephone No. \_\_\_\_\_

PURCHASER NAME(S) \_\_\_\_\_

Name(s) (as it will appear on Stock Certificate)

Current

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

1. Purpose for purchase of apartment: Permanent Residence \_\_\_ Seasonal Residence \_\_\_
2. A Copy of the Sales Contract is attached \_\_\_\_\_
3. I have received a copy of the "Rules We Live By" Yes \_\_\_ No \_\_\_
4. I hereby agree for myself and on behalf of all persons who may use the apartment that I will abide by the By-Laws and Rules and Regulations as they now exist or may hereafter be amended.



5. If I have or should subsequently have more than one automobile, I will park the second automobile outside of the premises or will obtain written permission to rent an assigned space in accordance with CRTE established procedures.
6. I understand that I will be advised by a member of the Board of Directors within two (2) days from the date of the interview of either acceptance or rejection of my application.
7. When my purchase is closed, I will provide a copy of the Closing Statement to the CRTE Office.
8. The undersigned applicant(s) authorize the Board of Directors or their agent to make whatever investigation they deem necessary in processing this application.
9. I warrant the truth and accuracy of all the inserted information.

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Signature of Applicant                  Date

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Signature of Applicant                  Date



APPLICATION FOR PURCHASE

This application and the Application for Occupancy must be completed by the proposed Purchaser(s). All applicants must be present for a personal interview by the Board of Directors prior to purchase. Children under the age of 18 are not permitted as permanent occupants. No pets are permitted on premises.

**For U.S. Applicants** – Please attach a processing fee of \$150.00 for each applicant.

**PLEASE PRINT LEGIBLY**

CTRE Apt. # \_\_\_\_\_ Anticipated Closing Date \_\_\_\_\_

SELLER NAME(S) \_\_\_\_\_ Telephone No. \_\_\_\_\_

PURCHASER NAME(S) \_\_\_\_\_

Name(s) (as it will appear on Stock Certificate)

Current

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

1. Purpose for purchase of apartment: Permanent Residence \_\_\_ Seasonal Residence \_\_\_
2. A Copy of the Sales Contract is attached \_\_\_\_\_
3. I have received a copy of the "Rules We Live By" Yes \_\_\_ No \_\_\_
4. I hereby agree for myself and on behalf of all persons who may use the apartment that I will abide by the By-Laws and Rules and Regulations as they now exist or may hereafter be amended.

# APPLICATION FOR OCCUPANCY

(PLEASE PRINT)

Apartment # \_\_\_\_\_ Bldg # \_\_\_\_\_ Purchase \_\_\_\_\_  
Date \_\_\_\_\_ Desired date of occupancy \_\_\_\_\_  
Name \_\_\_\_\_ Check one ( ) Married ( ) Divorced ( ) Separated ( ) Single ( ) Partnered  
Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_  
Spouse's name \_\_\_\_\_ Maiden name if married less than 2 years: \_\_\_\_\_  
(Show former spouse if divorced or separated)  
Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_  
Number of people will occupy: Adults (over age 18) \_\_\_\_\_  
In case of emergency, notify: \_\_\_\_\_  
Name Address Telephone

## Part 1 – RESIDENCE HISTORY

(PLEASE PRINT)

A. Present Address \_\_\_\_\_ Phone \_\_\_\_\_ How Long \_\_\_\_\_  
(Include apt. # if applicable)  
Name of Landlord or Mortgagee \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Mtg. # \_\_\_\_\_  
Apt. or Condo Name \_\_\_\_\_ (if applicable)  
B. Previous Address \_\_\_\_\_ How Long \_\_\_\_\_  
(Include apt. # if applicable)  
Name of Landlord or Mortgagee \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Mtg. No. \_\_\_\_\_  
Apt. or Condo Name \_\_\_\_\_ (if applicable)

## Part II – EMPLOYMENT AND BANK REFERENCES

(PLEASE PRINT)

A. Employed by \_\_\_\_\_ Phone \_\_\_\_\_ How Long \_\_\_\_\_  
Address \_\_\_\_\_ Dept. /position \_\_\_\_\_ Approx. Mo. Income \_\_\_\_\_  
B. Spouse's employment \_\_\_\_\_ Phone \_\_\_\_\_ How Long \_\_\_\_\_  
Address \_\_\_\_\_ Dept. /position \_\_\_\_\_ Approx. Mo. Income \_\_\_\_\_  
C. Bank Reference \_\_\_\_\_ Phone \_\_\_\_\_ How Long \_\_\_\_\_  
Address \_\_\_\_\_ Acct. # \_\_\_\_\_  
(Indicate checking or savings)  
D. Bank Reference \_\_\_\_\_ Phone \_\_\_\_\_ How Long \_\_\_\_\_  
Address \_\_\_\_\_ Acct. # \_\_\_\_\_  
(Indicate checking or savings)

## Part III – CHARACTER REFERENCES

(PLEASE PRINT)

CHARACTER REFERENCES:

1. \_\_\_\_\_ Res Phone \_\_\_\_\_ Ofc Phone \_\_\_\_\_

Address \_\_\_\_\_

2. \_\_\_\_\_ Res Phone \_\_\_\_\_ Ofc Phone \_\_\_\_\_

Address \_\_\_\_\_

3. \_\_\_\_\_ Res Phone \_\_\_\_\_ Ofc Phone \_\_\_\_\_

Address \_\_\_\_\_

NUMBER OF CARS ( Inc. co. cars) \_\_\_\_\_ Driver's License # \_\_\_\_\_ State \_\_\_\_\_

Make \_\_\_\_\_ Year \_\_\_\_\_ License \_\_\_\_\_

Make \_\_\_\_\_ Year \_\_\_\_\_ License \_\_\_\_\_

By signing, the applicant recognizes that the Association or agent may investigate the information supplied by the applicant and a full disclosure of pertinent facts may be made to the association.

Signature \_\_\_\_\_  
APPLICANT

Signature \_\_\_\_\_  
APPLICANT

# 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 \_\_\_\_\_

Signature

Date

\_\_\_\_\_  
Full Name - First, Middle, and Last Name (Please Print)

\_\_\_\_\_  
Home Address (Unit # if applicable)

\_\_\_\_\_  
CITY

STATE

ZIP

\_\_\_\_\_  
Social Security Number

Date of Birth

Driver's License Number and **State Issued**



## **A Summary of Your Rights Under the Fair Credit Reporting Act**

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus that gather and sell information about your creditworthiness to creditors, employers, landlords, and other businesses. The FCRA gives you specific rights, which are summarized below. You may have additional rights under state law. For more information, go to [www.ftc.gov/credit](http://www.ftc.gov/credit), or write to: Consumer Response Center, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

**You must be told if information in your file has been used against you.** Anyone who uses information from a consumer reporting agency to deny your application for credit, insurance, or employment – or take another adverse action against you – must tell you and give you the name, address, and phone number of the agency that provided the information.

**You can find out what is in your file.** At any time, you may request and obtain your report from a consumer reporting agency. You will be asked to provide proper identification, which may include your Social Security number. In many cases the report will be free. You are entitled to free reports if a person has taken adverse action against you because of information in a report; if you are the victim of identify theft; if you are the victim of fraud; if you are on public assistance; or if you are unemployed but expect to apply for employment within 60 days. In addition, you are entitled to one free report every twelve months from each of the nationwide credit bureaus and from some specialized consumer reporting agencies. See [www.ftc.gov/credit](http://www.ftc.gov/credit) for details about how to obtain your free report.

**You have a right to know your credit score.** Credit scores are numerical summaries of a consumer's creditworthiness based on information from consumer reports. For a fee, you may get your credit score. For more information, click on [www.ftc.gov/credit](http://www.ftc.gov/credit). In some mortgage transactions, you will get credit score information without charge.

**You can dispute inaccurate information with the consumer reporting agency.** If you tell a consumer reporting agency that your file has inaccurate information, the agency must take certain steps to investigate unless your dispute is frivolous. For an explanation of dispute procedures, go to [www.ftc.gov/credit](http://www.ftc.gov/credit).

**Inaccurate information must be corrected or deleted.** A consumer reporting agency or furnisher must remove or correct information verified as inaccurate, usually within 30 days after you dispute it. However, a consumer reporting agency may continue to report negative data that it verifies as being accurate.

**Outdated negative information may not be reported.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

**Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need as determined by the FCRA -- usually to consider an application with a creditor, insurer, employer, landlord, or other business.

**Your consent is required for reports that are provided to employers.** A consumer reporting agency may not give out information about you to your employer, or potential employer, without your written consent. Blanket consent may be given at the time of employment or later.

**You may choose to remove your name from consumer reporting agency lists for unsolicited credit and insurance offers.** These offers must include a toll-free phone number you can call if you choose to take your name and address off lists in the future. You may opt-out at the major credit bureaus by calling 1-800-XXXXXXX.

**You may seek damages from violators.** If a consumer reporting agency, a user of consumer reports, or, in some cases, a furnisher of information to a consumer reporting agency violates the FCRA, you may sue them in state or federal court.

**Identity theft victims and active duty military personnel have additional rights.** Victims of identity theft have new rights under the FCRA. Active-duty military personnel who are away from their regular duty station may file "active duty" alerts to help prevent identity theft. For more information, visit [www.ftc.gov/credit](http://www.ftc.gov/credit).

The FCRA gives several federal agencies authority to enforce the FCRA:

<b>TO COMPLAIN AND FOR INFORMATION:</b>	<b>PLEASE CONTACT:</b>
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission Consumer Response Center - FCRA Washington, DC 20580 1-877-382-4367 (Toll-Free)
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Programs Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-518-6360
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Division of Compliance & Consumer Affairs Washington, DC 20429 800-934-FDIC
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator - GIPSA Washington, DC 20250 202-720-7051

Shore Drive Apartments, Inc.

3300 NE 36th Street

Fort Lauderdale, FL 33308

**1<sup>st</sup> Applicant**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**2<sup>nd</sup> Applicant**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Base Pay (if working)**

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**Income from Pension**

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**Income from Social Security**

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**Interest on Savings accounts**

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**Income from:**

a. Stocks \$ \_\_\_\_\_

\$ \_\_\_\_\_

b. IRA'S \$ \_\_\_\_\_

\$ \_\_\_\_\_

c. Annuities \$ \_\_\_\_\_

\$ \_\_\_\_\_

d. Income from Rentals \$ \_\_\_\_\_

\$ \_\_\_\_\_

**Total Annual Income** \$ \_\_\_\_\_

\$ \_\_\_\_\_

Please provide supporting documents to verify each income item. All information is reviewed by Shore Drive staff and Board of Directors and is kept in strict confidence.

\_\_\_\_\_  
**1<sup>st</sup> Applicant Signature**

\_\_\_\_\_  
**2<sup>nd</sup> Applicant Signature**

**CONTACT/EMERGENCY INFORMATION FORM**

IN ORDER TO BRING OUR FILES UP TO DATE, PLEASE COMPLETE THE FOLLOWING INFORMATION AND RETURN TO OUR OFFICE AS SOON AS POSSIBLE.

DATE \_\_\_\_\_

NAME \_\_\_\_\_ APT # \_\_\_\_\_

**MAILING ADDRESS WHEN NOT IN RESIDENCE**

ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ ALT. PHONE \_\_\_\_\_

**PERSON TO CONTACT IN EMERGENCY**

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

ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ ALT. PHONE \_\_\_\_\_

**RELATIVES AND RELATIONSHIP-VALID PICTURE ID REQUIRED**

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

ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ ALT. PHONE \_\_\_\_\_

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

ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ ALT. PHONE \_\_\_\_\_

**THOSE WHO HAVE KEYS TO APARTMENT-VALID PICTURE ID REQUIRED**

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

ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ ALT. PHONE \_\_\_\_\_

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

ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ ALT. PHONE \_\_\_\_\_

**OTHER IMPORTANT INFORMATION**

DOCTOR \_\_\_\_\_ PHONE \_\_\_\_\_

HOSPITAL \_\_\_\_\_

ATTORNEY OR EXECUTOR \_\_\_\_\_ PHONE \_\_\_\_\_

VEHICLE \_\_\_\_\_ PLATE # \_\_\_\_\_

VEHICLE \_\_\_\_\_ PLATE # \_\_\_\_\_

## ACKNOWLEDGMENT

The undersigned applicants for membership at Coral Ridge Towers East have read the Articles of Incorporation, By-Laws and "rules We Live By" in connection with the Rules and Regulations regarding the use of the apartment and property. The undersigned acknowledges that they fully understand said rules and agree to comply with said Rules, By-Laws and Regulations as set forth herein.

\_\_\_\_\_ Initial      \_\_\_\_\_ Initial

## AFFIRMATION OF NO PETS RULE

Pursuant to Rule 2 of "THE RULES WE LIVE BY", we do hereby confirm that we do not have a dog, cat, bird or any other kind of animal or pet.

We further confirm that we will comply with the above RULE 2, and that we will not and that any of the guests will not any time during the term of our occupancy of the apartment have, keep, or maintain any such animals or pet of any kind in the Apartment or in any place in the Shore Drive Apartments complex.

\_\_\_\_\_ Initial      \_\_\_\_\_ Initial

## CRTE PARKING RULES

The Corporation assigns you one parking space per apartment. If you have more than one car, it is your responsibility to locate a parking space for your additional vehicles. The "Rules We Live By" do not allow Shareholders to park in the Guest Parking area.

I understand the Parking Rules and will make arrangements for my additional vehicles in accordance with all CRTE rules and regulations.

\_\_\_\_\_ Initial      \_\_\_\_\_ Initial

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Applicant