

45 OCEAN CONDOMINIUM
4511 SOUTH OCEAN BOULEVARD
HIGHLAND BEACH, FL 33487-4276
P. 561-272-7001 FAX (561)272-2062
fortyfiveocean.officemanager@gmail.com

ATTENTION: Board of Directors, 45 Ocean Condominium

In accordance with Declaration of Condominium of 45 Ocean Condominium, you are hereby notified that I desire to accept the Bona Fide offer made to me by _____ to Lease my private unit # _____, address _____ South Ocean Boulevard, assigned Parking Space # _____. The term of the lease is from _____ to _____ inclusive. I am aware of the fact that the Board of Directors has a period of 30 days in which to process this application.

Date: _____

Owner's Signature: _____

Owner's Signature: _____

Owner and Tenant Agree That Lease Shall Be Subject to All the Provisions of the Condominium Documents.

APPLICATION OF PROSPECTIVE LESSEE

In order for you to facilitate consideration of my/our application for the Lease of the above named Unit in 45 Ocean Condominium, I/We represent that the following information is factual and true. I/We consent that you may make further Inquiry concerning this Application, particularly of the references given below. Children under 12 years of age are not permitted to use condominium facilities without adult supervision. **NO TENANTS OR GUESTS ARE PERMITTED PETS.** No children under 3 years of age or in diapers are permitted in the pool. A **PERSONAL** interview is required. Final approval of the Lease is subject to a personal interview by the Board of Directors. Date and time for personal interview will be set by the Board of Directors.

INTERVIEWS ARE SCHEDULED AFTER ASSOCIATION'S RECEIPT OF BACKGROUND REPORT.

Please attach:

- [] 1. Copy of Lease Agreement
- [] 2. Check for \$200.00 by Purchaser to 45 Ocean Condominium. Enclosed for processing.
- [] 3. Copy of Current Driver's License or Picture Identification Card.