

1300 NW 17th Ave. Suite 270 Delray Beach, FL 33445 (561)637-3402 Office (561)637-3407 Fax

Instructions for Permanent Resident Application – All Kings Point Associations

- 1) APPLICATION MUST BE SUBMITTED AT LEAST THIRTY (30) DAYS PRIOR TO MOVE IN DATE.
- 2) TWO (2) COMPLETE, SEPARATE SETS OF EVERYTHING LISTED BELOW MUST BE SUBMITTED. (APPLICATION AND PAPERWORK CONSTITUES ONE SET.) ONE SET OF THESE MUST BE THE ORIGINAL PAPERWORK.
- 3) EACH PAGE MUST BE <u>PROPERLY</u> COMPLETED.
- 4) EACH APPLICATION MUST INCLUDE A PHOTO ID (ON 8 ½ X 11 PAPER) SHOWING DATE OF BIRTH OF **EACH** OCCUPANT.
- 5) A \$100.00 NON-REFUNDABLE APPLICATION FEE IS REQUIRED ON ALL APPLICATIONS. THE \$100.00 APPLICATION FEE MUST BE MADE PAYABLE TO: THE ASSOCIATION IN WHICH YOU WILL BE A PERMANENT RESIDENT.
- 6) THE VESTA PROPERTY SERVICES INFORMATION PAGE AT THE END OF THIS APPLICATION MUST BE SIGNED.
- 7) ALL THREE PERSONAL REFERENCES **MUST BE COMPLETE, SIGNED,** AND PART OF THIS APPLICATION.

ALL MATERIALS MUST BE PROPERLY COMPLETED AND SUBMITTED TOGETHER OR THIS APPLICATION PACKET MAY NOT BE PROCESSED. OUR OFFICE WILL DO ITS BEST TO EXPEDITE ALL PAPERWORK IN A TIMELY FASHION. WE WOULD LIKE TO CONVEY TO YOU THAT MOST DELAYS ARE CAUSED BY INCOMPLETE PAPERWORK. PLEASE LOOK OVER THESE INSTRUCTIONS CAREFULLY. PLEASE CALL OUR OFFICE (561) 637-3402 WITH ANY QUESTIONS BEFORE SENDING COMPLETED PACKETS IN.

1300 NW 17th Ave. Suite 270 Delray Beach, FL. 33445 Telephone (561)637-3402 Fax (561)637-3407

Permanent Resident Information Sheet

ASSOCIATION:			UNIT #:	
Name of current Owner	s:	MATERIAL TO THE TOTAL THE TOTAL TO THE TOTAL		
Current Owner's Addres	s:			
City/ State/ Zip:				
Current Owner's Phone	Number:	Current Owner's Cell	Number:	
Name of Applicant:		SS#:	Age:	
Co-Applicant:		SS#:	Age:	
Applicant's Address:				
City/ State / Zip:				
Applicant's Phone:	,	Applicant's cell phone:		
-Mail Address:	.			
Vehicle Information:				
Make:	Model:	Year:	Plate #	
Make:	Model:	Year:	Plate #	
<u>PLEA</u>	SE LIST ALL OC	CUPANT(S) WHO WILL RESIDE AT UNIT	IF APPROVED	
Name		Relationship to Purchaser	Date of Birth	
DIEACE DDOMBEA	14 ME 4 MD 4 DD	RESS OF WHERE TO SEND APPROVED O	CERTIFIC ATE OF APPROVAL	

1300 NW 17th Ave. Suite 270

Delray Beach, FL 33445

Telephone (561)637-3402 Fax (561)637-3407

Permanent Resident(s) Agreement

In making this application to become a permanent resident noted on page one of this application, I/ we understand that acceptance of the application is conditioned on the approval of the Board of Directors.

- Agree that if the application is approved, to abide by all the Rules and Regulations, By-Laws and any and all restrictions of the association and any changes that may be imposed in future.
- Agree that the unit may not be occupied in my absence without the prior knowledge of the Board.
- Permanent Resident(s), acknowledge receipt of a copy of the Condominium Documents. It
 is the permanent resident's responsibility to obtain Condominium Documents from current
 owner. They may be purchased from Wilson Management for \$100.00 if necessary.
- Have enclosed a check in the amount of \$100.00 payable to **Association** as provided for by Florida Statutes and by the Condominium Documents.
- Understand that if any check paid by the Owner(s), and/or Permanent Resident(s), is returned unpaid, any approval granted will be voided.

Applicant's Signature	Date	
Applicant's Signature	Date	

1300 NW 17th Ave. Suite 270 Delray Beach, FL 33445 Telephone (561)637-3402 Fax (561)637-3407

Age Verification Questionnaire

Association:			Unit:	
Please list every person who photographic evidence indic occupant.				
OWNER(S) NAME	AGE	TYPE OF ID	DOB	RELATIONSHIP
Signature(s) of Permanent R	esident(s)	Date:		
Signature		Signati	Jre	
Printed Name		 Printec	l Name	
Signature		Signate	ure	
Printed Name		Printec	Name	

1300 NW 17th Ave. Suite 270 Delray Beach, FL 33445 Telephone (561)637-3402 Fax (561)637-3407

Request for Personal Reference

Association:	Unit:
Dear Sir/Madam:	
	has listed you as a character reference in an application to
	partment in the above referenced Condominium Association.
	respectfully request any information you can give use regarding theiond by providing brief comments in the space provided below, as
	ult in unnecessary delays to the Applicant's closing and/or move in nimum of thirty (30) days to properly review, approve and submid/or closing date.
Thank you in advance for your value confidential.	able assistance, and we assure you that your reply will be kep
CHARACTER:	
INTEGRITY:	
OTHER COMMENTS:	
Signature	Date
Printed Name	Phone/Cell Number
Address	City, State, Zip Code

1300 NW 17th Ave. Suite 270 Delray Beach, FL. 33445 Telephone (561)637-3402 Fax (561)637-3407

Request for Personal Reference

Association:	Unit:
Dear Sir/Madam:	
	has listed you as a character reference in an application to partment in the above referenced Condominium Association.
	respectfully request any information you can give use regarding their and by providing brief comments in the space provided below, as
	sult in unnecessary delays to the Applicant's closing and/or move in nimum of thirty (30) days to properly review, approve and submit nd/or closing date.
Thank you in advance for your value confidential.	able assistance, and we assure you that your reply will be kept
CHARACTER:	
INTEGRITY:	
OTHER COMMENTS:	
Signature	Date
Printed Name	Phone/Cell Number
Address	 City, State, Zip Code

1300 NW 17th Ave. Suite 270 Delray Beach, FL. 33445 Telephone (561)637-3402 Fax (561)637-3407

Request for Personal Reference

Association:	Unit:
Dear Sir/Madam:	
	has listed you as a character reference in an application to partment in the above referenced Condominium Association.
	respectfully request any information you can give use regarding thei and by providing brief comments in the space provided below, as
	ult in unnecessary delays to the Applicant's closing and/or move in nimum of thirty (30) days to properly review, approve and submi d/or closing date.
Thank you in advance for your value confidential.	able assistance, and we assure you that your reply will be kep
CHARACTER:	
INTEGRITY:	
OTHER COMMENTS:	
Signature	Date
Printed Name	Phone/Cell Number
Address	City, State, Zip Code

1300 NW 17th Ave. Suite 270
Delray Beach, FL. 33445
Telephone (561)637-3402 Fax (561)637-3407

Applicant(s) Information Sheet

Applicant's Name:	Applicant's Name:						
Association:			Unit #				
If you are a seasonal applicant, please provide our office with your seasonal address and phone number:							
Seasonal Address:							
Local Phone:		Seasonal Phone:					
PLEASE SPECIFY YOUR MAILING PREFERENCE:							
Please send all my mail to my local address at all times.							
Please send all my mail to my seasonal address at all times.							
Please Note: It is the Unit Owners responsibility to let Wilson Management know of any changes as they occur in regards to the mailing address.							
EMERGENCY CONTACT INFORMATION:							
Name	Relationship	Phone	Keys: Yes or No				

Please use the last column to indicate which of your emergency contact has your key to your home.

READ FIRST: Complete all questions and fill in all blanks. All information supplied is subject to verification. If any question is not answered/left blank, or answered falsely, this application may be returned, not processed, and/or not approved. Missing information will cause delays. Once submitted, order can be cancelled but your fee will not be refunded. Rev. 06/2014

** THIS APPLICATION IS FOR A SINGLE PERSON OR A MARRIED COUPLE ONLY! **

APPLICATION FOR OCCUPANCY

	Association	Name:			
Circ	cle one: Purchase - Lease - Occupant - Unit	# Bldg.# Add	ress applied for:		
Full	ll Name		Date of Birth	Social Security #	
Circ	cle One: Single - Married - Separated - Divo	orced - How Long? C	ther legal or maiden name		
Hav	ve you ever been convicted of a crime?	Date (s)	County/State Conv	victed in	
Cha	arge (s)				
App	plicant's Cell Number(s)	Applicant's	Email Address		
Spo	ouse		Date of Birth	Social Security #	
Oth	ner legal or maiden name	Have you e	ver been convicted of a crim	ne? Date (s)	
Cou	unty/State Convicted in	Char	ge (s)		
Spo	ouse's Cell Number(s)	Spouse's Email	Address		
No.	of people who will occupy unit – Adults (o	ver age 18) Description	of Pets		
Nan	mes and ages of others who will occupy uni	<u></u>			
In c	case of emergency notify		Address	Phone	
		PART I – RESID	ENCE HISTORY		
A.	Present address(Include unit/apt number, city, state and z			Phone	
	Apt. or Condo Name	Phone)	_ Dates of Residency: From	to
	Circle one: Own Home - Parent/Family M	Member - Rented Home - Rented	l Apt - Other	Rent/Mtg Amount	
	Are you on the Lease? If not, who	is the leaseholder?	Are you on the Deed? _	If yes, under what name?	
	Name of Landlord	Phone	E	mail address	
	Circle one: Is your Landlord the: Owner of	of the property - Realtor - Famil	y Member - Roommate - Pi	operty Manager - Other	
B.	Previous address(Include unit/apt number, city, state and z				
	Apt. or Condo Name	Phone	·	_ Dates of Residency: From	to
	Circle one: Own Home - Parent/Family M	Member - Rented Home - Rented	l Apt - Other	Rent/Mtg Amount	
	Were you on the Lease? If not, wh	o is the leaseholder?	Were you on the Deed	?If yes, under what name?	
	Name of Landlord	Phone	E	mail address	
	Circle one: Is your Landlord the: Owner of	of the property - Realtor - Famil	y Member - Roommate - Pr	operty Manager - Other	
C.	Previous address(Include unit/apt number, city, state and z	ip code)			
	Apt. or Condo Name	Phone	·	_ Dates of Residency: From	to
	Circle one: Own Home - Parent/Family M	Member - Rented Home - Rented	l Apt - Other	Rent/Mtg Amount	
	Were you on the Lease? If not, wh	o is the leaseholder?	Were you on the Deed	?If yes, under what name?	
	Name of Landlord	Phone	E	mail address	
	Circle one: Is your Landlord the Owner	of the property Poeltor Family	y Mambar Doommata D	concerty Managar Other	

PART II – EMPLOYMENT REFERENCES

Include a recent copy of an earnings statement to expedite processing

A.	Employed by			1	Phone
	Dates of Employment: From: _	To:	Position	1	Fax
	Monthly Gross Income	Address			
B.	Spouse Employed by				Phone
	Dates of Employment: From: _	To:	Position		Fax
	Monthly Gross Income	Address			
				K REFERENCES statement to expedite pr	rocessing*
A.	Bank Name		Checking Acct. #		Phone
	Address				Fax
ъ	D. I.N.		G : A . !!		DI.
В.					Phone
	Address				Fax
		PART IV – C	CHARACTER RE	FERENCES (No Family	Members)
1.	Name			Home Phone	
	Address			Business Pho	one
	Email Address			Cellular Phor	ne
2.	Name			Home Phone	>
	Address			Business Pho	one
	Email Address			Cellular Phor	ne
2	N			II DI	
3.					one
					ne
	Eman Address			Cenulai Filoi	ic
4.	Name			Home Phone	>
	Address			Business Pho	one
	Email Address			Cellular Phor	ne
Are	e you using a realtor? Yes_	No	If yes: Realt	or's name	
Ema	nil Address			Cellular Phone _	
Driv	ver's License Number (Primary A	pplicant).			State Issued
	-				State Issued
					License Plate No.
					License Plate No.
If th		not completely and	accurately filled out, A	Associated Credit (and the As	ssociation) will not be liable or responsible for
disc	losure of pertinent facts will be	made to the Associa	ation. The investigation	on may be made of the appl	rmation supplied by the applicant, and a full icant's character, general reputation, personal usive use of Associated Credit Reporting, Inc.

Applicant's Signature _____ Date ____ Spouse's Signature ____ Date _____

4690 NW 103rd Avenue, Sunrise, Florida 33351 www.associatedcreditreporting.com

AUTHORIZATION FORM

I/We hereby authorize **Associated Credit Reporting, Inc.** to obtain data to verify any and all information they request with regards to my/our Application for Occupancy, specifically the verification of my bank account(s), credit history, residential history, criminal record history, employment verification and character references.

I/We hereby waive any privileges I/we may have with respect to the said information in reference to its release to the aforesaid party. Information obtained for this report is to be released to the authorized party designated on the Application for Occupancy, for their exclusive use only. PLEASE INCLUDE COPY OF DRIVER'S LICENSE TO CONFIRM IDENTITY. If you do not have a driver's license, please include a copy of your Passport or current government issued identification card.

I/We acknowledge our rights as stated in the Fair Credit Report Act that I/we are entitled to a copy of the report upon proper written request and can dispute any inaccurate information for re-verification. I/We understand that Associated Credit Reporting, Inc. is not directly involved in the approval or denial of any applicant. The information received by Associated Credit Reporting, Inc. shall be held in strict confidence, protected as governed under the Fair Credit Reporting Act, and will never be released to any third party other than the designated recipient. I/We further understand that this is a non-refundable process.

By signing below, I/We further state the Application for Occupancy and Authorization Form were signed by me/us and was not originated with fraudulent intent by me/us or any other person and that the signature(s) below are my/our own proper legal signature. I/We certify (or declare) under penalty of perjury that I/We agree to the foregoing and; that all answers and information contained on the Application for Occupancy are true and correct and will hold Associated Credit Reporting, Inc. harmless from the result of the investigation.

(Applicant's Signature)	(Spouse's Signature)
(Applicant's Name Printed)	(Spouse's Name Printed)
,	(27 - 111 - 2 - 1

Exhibit 8 Basic Building Rules of Normandy G Condo Assoc

Our building follows the rules appearing in our Declaration of Condominium and our By-Laws, as well as the Florida Condominium Act. Up to date copies of these documents can be found through our website.

VISIT OUR OWNERS WEBSITE: http://normandygassoc.weebly.com/ Here are some of the more common issues:

- 1. All requests for unit sales/leases must be presented to our current management company in writing. The request will be presented to the Board of Normandy G for review and approval. The approval will follow the guidelines set out in our Declaration of Condominium. A resident is somebody inhabiting a unit for more than 1 month and, if no owner is present, is considered a tenant (NEEDING BOARD AUTHORIZATION). Inhabited units must have at least one resident 55 years or older.
- 2. Our policy is strictly "NO PETS". All requests for Service Animals/Emotional Support Animals must be presented to our current management company in writing. The request will be presented to the Board of Normandy G for review and approval. All Condo rules regarding Service Animals/Emotional Support Animals must be followed. Special care should be made as to where the animal is walked, cleaned up after, and the animal must be leashed. We have a specific area designated for animal use, at the end of Piedmont Way by the hedges. All nuisances must be avoided.
- 3. Any approvals of visitors/family members staying in owners units for more than one week and up to one month are automatic, provided the owner signs this rule page and notifies the board in writing. It's the owner's responsibility to make sure these rules are followed. The notification should include the unit #, the names of the people staying, and the dates. The notification can be emailed to our website. For visits any longer than one month, application must be presented in writing to our current management company, and may require a background check. The request will be presented to the Board of Normandy G for review and approval. Family and friends are welcome, but please remember that all article and by —law requirements must be followed during their stay.
- 4. All garbage must be placed in the large dumpsters that are at each end of the building. We also have recyclable containers in each area for paper and glass or plastic bottles. Please remember to break down your boxes so that other residents have room to place their garbage in the containers.
- 5. LARGE DEBRIS must be placed out on MONDAY NIGHTS ONLY and placed on the roadside area of the dumpster. This is so the truck that comes on Tuesday ONLY can see the debris and get workable access to pick it up.

PLEASE REMEMBER: Unit owners have the right to modify the inside of their apartments (from paint to paint). All else is probably a material alteration to the common element, and requires approvals. All renovations must conform to State and Local building codes. The board must be notified prior to any renovation. Contractors must remove their debris and not leave it in or at our container area. The owner may be charged for any extra pick up charges given to the building. All contractors and delivery men are strictly forbidden to use the lift/elevator.

- 6. Owners are required to provide working keys to Normandy G for routine and emergency maintenance (where access is needed to avoid damage to other units). Additionally, the access may be used for emergency unit access by the Police, Fire Dept. or Ambulance. We strongly recommend you leave an extra key with a neighbor or install a lockbox at your door for any other purposes.
- 7. No items may be placed on the walkways or staircases. This includes door mats, holiday decorations, bikes, walkers, etc. This could cause a trip/fall situation for our neighbors.
- 8." Backed in Parking" and motorcycles/scooters are allowed in our parking lot, along with passenger cars (including mini-vans). No commercial vehicles, RV's or vans should be left overnight on our property
- 9. The lift/elevator is designed for the use of no more than 2 persons, with a total weight of no more than 650 lbs. Excessive weight can result in costly repairs, which may be passed along to the unit owner along with a fine.
- 10. No personal property can be left on the common elements overnight without prior approval of the Board of Directors.
- 11. All inquiries regarding the above rules should be mailed or emailed to our current management company:

WILSON MANAGEMENT 1300 NW 17TH AVE. SUITE 270 DELRAY BEACH, FL 33445

www.wilsonmanagement.net	tammy@wilsonmanagement.net

Ciana de una	11	Data	
Signature	Unit	Date	
	· · · · · ·		_



Kings Point Rental and Resale Information

ID OFFICE

561-499-3335 Ext. 136 & 135 Monday – Friday 9:00 AM – 4:00 PM Saturday & Sunday 10:00 AM – 3:00 PM (November - May) Closed Saturday & Sunday (June – October)

Fees (Subject to Change)

Effective 09/01/2020* - Processing Fee (New Owners Only) - \$1,500.00
 Includes one (1) Resident ID Card and one (1) Barcode

Prices remaining the same:

Resident ID \$60.00
 Single Resident ID \$60.00
 Lessee ID \$60.00

• Guest ID \$10.00 (See procedural guide for further details)

Health Aide ID \$50.00 (Three months)

Barcode \$10.00Saxony RFID Tag \$10.00

Vesta Property Services Requirements:

Before issuing **Resident ID cards**, we must receive the following:

- A copy of the Certificate of Approval from the association's management company approved by an association officer with the association seal and,
- The previous owner's ID card(s) must be turned in to Kings Point's ID office. If the ID card(s) cannot be located, a \$60 fee for each outstanding ID card must be paid before new ID cards will be issued. Checks payable to: Kings Point Recreation Corp., Inc.
- Note: Maximum of two (2) resident ID cards per unit. The first ID card purchased for a resident/lessee must be issued to an individual fifty-five (55) years of age or older.

Before we can issue Lessee ID cards, the ID office must receive the following:

- A copy of the Certificate of Approval from the association's management company approved by an association officer with the association seal, along with a lease and,
- Any outstanding ID cards issued for that unit must be turned in.
- As of August 6, 2015, any unit that is SOLD, if there is an existing lease on the unit AND the lessee turns in their ID cards, ID Cards can be purchased by the new owner, even if the lease has not expired.
- Any Owner or Tenant that breaks the lease, the existing rule below still follows:

Resident ID card(s) will not be issued or another Lessee ID card(s) will not be issued until the expiration of the current lease. No Exceptions!

Kings Point Recreation Area Amenities

The Recreation facilities consists of three (3) clubhouses, swimming pools, Natatorium, golf courses, tennis, shuffleboard, pickleball, bocce ball, racquetball and basketball courts, canals, entry gates and roads of the community and other common facilities. Kings Point is a "NO PET" community. The Recreation Area does not include condominium property and its parking areas or common grounds. Our residents also have use of the Kings Point buses. The buses serve the community, the immediate surrounding areas and shopping centers. To assure that residents and their guests have exclusive access to all recreation facilities, a Kings Point ID is necessary. The ID cards are issued in the ID Office located in the Administration Building.

PLEASE READ CAREFULLY BEFORE SIGNING!!!!

*Signature:	*Signature:
Seller/Owner	Buyer/Tenant
7000 West Atlantic Avenue, Delray Beach, FL. 33446-1699, Telephone 561-499-3335	
***** <u>Effective 09/01/2020</u> *****	

As a reminder, any new purchaser must pay the processing fee before any ID's are issued. That includes purchases for the purpose of renting the unit. Processing fee must be paid before a tenant can receive their ID's.

KINGS POINT USER ACCOUNT REGISTRATION

SIGN IN or CREATE AN ACCOUNT at the kingspointdelray.com website

The enhanced access control system is ready to launch and will be linked to the Kings Point ID system so that you can start developing your list of friends and family for your Permanent/Temporary/ Vendor gate access.

- 1. Every resident that has a Community ID are already in the ID system. Those of you that have purchased theater tickets using the internet have already activated their accounts.
- 2. For each resident, there will only be ONE account. It will allow you to maintain a Permanent/ Temporary/Vendor Guest list, purchase tickets to our theater and register for "T Times" at the golf course. It will also link purchased theater tickets into the data base so that security will know who is on our property. Remember – persons who do not have ID cards will not be able to activate an account.
- 3. Activate your account by going to the kingspointdelray.com website.
 - a. On the "Home Page" click on the "Gate Access/Visitor Management" link in order to sign in or create an account.
 - b. Click on "Create Account" and a new screen will appear. The badge number and name you fill in must match the name as it appears on your ID. When creating your account you select a user name and the password. Note the password restrictions listed at the bottom of the page. Make sure that you keep your user name and password in a safe place, as you will need it every time you access your account. When completed, click on "Create User" at the bottom of the page. You have now completed your part of the activation process.
 - c. You will be notified when your account has been activated (within 72 hours).
- 4. If two persons living in a unit have different last names, it is advisable for each to activate his/her own account. The two accounts will be linked by unit address so that when purchasing tickets during the restricted period, a unit can still only purchase two tickets.
- 5. Populate your account by going to the <u>kingspointdelray.com</u> website and *click on the "Gate Access/Visitor Management"* link.
 - a. Click on "Sign In" and enter your user name and password.
 - b. Click on "Sign Me In" and fill in the data requested. Permanent Visitors do not need a visit date.

 Temporary Visitors will need to fill in the dates for each visitor. Names on the "Temporary" list are automatically deleted at the end of their authorized access time.
 - c. The "Permanent" list will be updated on an annual basis.
 - d. Vendors that issue their employees identification cards, i.e. the Post Office and FedEx do not need to be added to your list.
- 6. Do not have a computer? Call the Staff Office at 561-499-3335/561-499-7751 Ext. 225 for an appointment. The Staff will help you activate your account and enter the data.
- 7. Target date to activate the system at the Normandy Gate is on Monday, May 4th. Once the system is running smoothly at the Normandy Gate, the other manned gates at Kings Point will be implemented.

Like any new major change, this will require your patience as it is a massive programming effort with links to several existing systems. However, you can help in the implementation if you are a resident by obtaining your Kings Point ID. All Residents and Lessees with a vehicle should purchase a barcode for easy access thru the gates.