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CLOVER KEY

## **RESIDENTIAL SCREENING AUTHORIZATION FORM**

*Each applicant MUST fill out a separate release*

**PROPERTY NAME: Village Square of Titusville**

(Please Print)

FULL Name: \_\_\_\_\_ Sex: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Driver's License # \_\_\_\_\_ State Issued: \_\_\_\_\_

**(Must Include a Colored Copy)**

Phone # \_\_\_\_\_ Cell or Home (circle one)

**If Leasing:** Number of Months: \_\_\_\_\_ Move-in Date: \_\_\_\_\_ Move-out Date: \_\_\_\_\_

**(If leasing, must include a copy of the Signed Lease)**

**If Purchasing:** Date of Closing: \_\_\_\_\_ **(Must include a copy of the Sales Contract)**

Employer Company: \_\_\_\_\_ Phone: \_\_\_\_\_ Years with Company: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_

Have you ever been evicted? YES \_\_\_\_\_ NO \_\_\_\_\_

Have you ever been in litigation with a landlord? YES \_\_\_\_\_ NO \_\_\_\_\_

Have you ever had adjudication withheld or been convicted of a crime? YES \_\_\_\_\_ NO \_\_\_\_\_

Current Unit Owner Name: \_\_\_\_\_ Unit # \_\_\_\_\_

*I give my authorization to this landlord, AccuData Inc, or any party or agency contacted by this landlord to obtain and verify the above information, concerning a credit report, criminal records, motor vehicle and other history. I understand that inquiries may be made to various federal and state agencies, employers, and references.*

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

AccuData Screening Requested:

**Package: 1 (2) 3 4**

Phone: (954) 755-8379 Fax: (800) 521-1905 Email: [AccuDataInc@Bellsouth.net](mailto:AccuDataInc@Bellsouth.net)

Application for Purchase Approval  
Village Square of Titusville Condominium Association  
(Page 1 of 2)

(Please Print) Complete all Questions and fill in all blanks. Processing Fee **\$50 (non-refundable)**

Date: \_\_\_\_\_ Bldg.# \_\_\_\_\_ Harrison St., Unit # \_\_\_\_\_ Unit Owner's Name \_\_\_\_\_

**Estimated Sale Date:** \_\_\_\_\_

**Buyer Name:** \_\_\_\_\_ **Buyer Name:** \_\_\_\_\_

Drivers Lic. # & State: \_\_\_\_\_ Drivers Lic. # & State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

**Other Persons occupying unit:**

Name:	Relationship	Occupation or school

**Present Address:** Street \_\_\_\_\_, Apt or Unit No. \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_ How long: \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Employment:**

Company: \_\_\_\_\_ Position: \_\_\_\_\_ Phone # \_\_\_\_\_

**Co-Applicant Employer:**

Company: \_\_\_\_\_ Position: \_\_\_\_\_ Phone # \_\_\_\_\_

**Pets: (Pets must weigh less than 20 pounds and no taller than 14 inches at shoulder)**

Species: \_\_\_\_\_ Breed: \_\_\_\_\_ Color: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_

Species: \_\_\_\_\_ Breed: \_\_\_\_\_ Color: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_

**Vehicles: (One parking space per unit-See Rules and Regulations for additional parking)**

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Tag: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Tag: \_\_\_\_\_

**Emergency Contact:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone # \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone # \_\_\_\_\_

**Background statements for all who will reside in unit:**

Has anyone been convicted of a Felony: Yes [ ] No [ ] Evicted: Yes [ ] No [ ] Initials \_\_\_\_\_

Details if answer is "yes": \_\_\_\_\_

Village Square of Titusville Condominium Association Application to Purchase  
(Page 2 of 2)

Date: \_\_\_\_\_ Unit # \_\_\_\_\_ Unit Owner's Name: \_\_\_\_\_

Buyer Name(s): \_\_\_\_\_

**Regulations:**

I have [ ] received a copy of Village Square Condo's Rules and Regs. Initials: \_\_\_\_\_

***Restrictions:***

**Buyer agrees to park only in their marked vehicle space in front of their building. All other vehicles used by residents in this unit must be parked in the "un-marked" (black rectangle) spaces. "Guest" spaces are only for short term visitors or delivery personnel. Initials: \_\_\_\_\_**

**Buyer agrees to allow Association to run a nationwide background check. Initials: \_\_\_\_\_**

**Buyer agrees to limit pets to no more than two (2) and to limit their weight to no more than twenty (20) pounds each, with a height of no more than 14" at the shoulder. Initials: \_\_\_\_\_**

**Buyer agrees that no vehicles with oil or fluid leaks will be parked on the condominium property. Any repairs or clean-ups will be billed to the tenant and owner. Initials: \_\_\_\_\_**

**Buyer agrees to limit occupancy to residential use for those people listed on this form, and short time guests only. Initials: \_\_\_\_\_**

**Buyer agrees to abide by all rules, regulations, restrictions and covenants of The Village Square Condo. Initials: \_\_\_\_\_**

**Buyer agrees that if any other person not listed on this form must stay longer than two (2) weeks, they will request approval from the Board in writing BEFORE the stay. Depending on the length of stay and circumstances, a variance may be granted, or see below: Initials: \_\_\_\_\_**

**Buyer agrees that if any person not listed on this form moves in (marriage, roommate, family member, etc) they will be required to fill out an "Application to Lease" form and pay the application fee to have a background check done. Initials: \_\_\_\_\_**

**If this application is not legible or not accurately filled out, Village Square Condominium Association will not be liable or responsible for any inaccurate information in the investigation and related report (to the Association) caused by such omissions or illegibility.**

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

Signature Buyer: \_\_\_\_\_ Date: \_\_\_\_\_

Signature Buyer: \_\_\_\_\_ Date: \_\_\_\_\_

**THIS SECTION FOR ASSOCIATION USE ONLY**

Copy of Contract Received: Yes [ ] No [ ] \$50 Processing fee received: Yes [ ] No [ ]

Check Number: \_\_\_\_\_

This application reviewed by: \_\_\_\_\_ on \_\_\_\_\_ and approved Yes [ ] No [ ]

Owner notified of status on (Date): \_\_\_\_\_.

COMMENTS BY THE BOARD OF DIRECTORS: \_\_\_\_\_

**Notice of Intent to Purchase - Buyer**  
Village Square of Titusville Condominium Association, Inc.

Address: \_\_\_\_\_ Seller Last Name: \_\_\_\_\_ Date \_\_\_\_\_

**IMPORTANT THINGS TO KNOW:**

**1. PARKING**

Each unit has 1 designated parking space. All other vehicles must park in the undesignated "dark rectangle" spaces. Guest parking spaces are ONLY for deliveries and short-term visits (less than 48 hours).

**2. PETS**

No more than 2 pets are allowed per unit. No pet shall weigh more than twenty (20) pounds and fourteen (14) inches in height at the shoulder AT MATURITY. In the case of pet excrement left behind, the Association Rules permit "Doggie DNA" testing and the Owner will be fined for all costs.

**3. KEYS**

If Buyer changes any locks, the replacement key must be given to the Association. The Seller is responsible for transferring all keys to Buyer, including pool key.

**4. 2<sup>ND</sup> FLOOR CARPETING**

All second-floor units MUST have carpeting in all walking areas, except for kitchen, bathroom(s), and hallways.

**5. 2<sup>ND</sup> FLOOR BALCONY FLOORS**

No permanent carpeting may be placed on a second-floor patio deck/balcony.

**6. RENTALS**

Village Square only permits 30% of units to be leased as rentals. There is a waiting list for rentals. Landlords have 30 days to fill a vacant unit, or the opportunity to rent will be moved to the next unit on the waiting list.

\_\_\_\_\_ I have read and understand the Rules listed above.

\_\_\_\_\_ I have been given the opportunity to ask questions about the Rules listed above.

\_\_\_\_\_ I agree to comply with all Association rules, including those not listed above.

\_\_\_\_\_  
BUYER'S SIGNATURE

\_\_\_\_\_  
2<sup>nd</sup> BUYER'S SIGNATURE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
PRINT NAME

PHONE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

I am purchasing this property with the intention to: (Check One)

- Reside as Owner(s) on a full-time basis     Reside as Owner(s) on a part-time basis     Lease the property