

HORIZONS CONDOMINIUM #4 ASSOCIATION INC. 8015 SW 107 AVE. Miami, FL 33173

APPLICATION FOR OCCUPANCY, PURCHASE, LEASE, GIFT, DEVISE OR INHERITANCE

IMPORTANT!! PLEASE READ

Please fill out this application completely and hand deliver or mail the original application to the address below. An incomplete application will not be accepted.

Miami Management, Inc.
C/O Ileana Sainz
14275 SW 142 Ave
Miami, FL 33186

Please contact Ileana Sainz if you have any questions pertaining to the application and its status. Contact information is as follows:

Tel: 305-259-1401
Fax:305-252-6728
ISainz@miamimanagement.com

NO EXCEPTIONS!!!

This application may take up to 20 business days (4 weeks) to process. There is **NO** rush service available. Please take this into consideration when planning a move-in or closing date.

Thank you,
The Board of Directors

HORIZONS CONDOMINIUM #4 ASSOCIATION INC.

8015 SW 107 AVE. Miami, FL 33173

APPLICATION FOR OCCUPANCY, PURCHASE, LEASE, GIFT, DEVISE OR INHERITANCE

When a unit is owned by more than one entity, all owners must sign or provide proper power of attorney. Please complete all required forms and affidavits. Upon receipt of all completed paperwork, your application will be processed. An incomplete application will not be accepted. **Please allow at least 20 business days (4 weeks)** for the processing of the application. When you submit the application package, the following items must be provided:

- Single applicants or married couples pay a \$100.00 application fee and each additional applicant pays \$100.00 (non-refundable).** (Any person 18 years and older must apply).
 **Additional fees may apply for international background checks.
- Processing fee \$50.00 (non-refundable) payable to Miami Management.
- FOR LEASE APPLICATIONS ONLY – **Tenants** are required to provide a **\$250.00 security deposit** towards damages to any common element (refundable).
- FOR LEASE APPLICATIONS ONLY - **Completed and notarized** Addendum to Lease located on pages 13 and 14 (owner and applicants on the lease agreement must sign page 14).
- A copy of **local police report** for each applicant age 18 and older.
- A copy of a **valid picture ID** for each applicant and resident age 18 and older.
- A copy of the **social security cards or U.S. resident visa** for each applicant and resident age 18 and older.
- A copy of each **vehicle registration** that will be parked in the community.
- FOR LEASE APPLICATIONS –An executed copy of a lease for only a one-year term containing all of the pertinent terms and conditions of such lease. The copy must be legible. (All individuals 18 years and older must be on lease and all minors must be listed as a resident on the lease agreement).
- FOR SALE APPLICATIONS – Provide an executed copy of the sales contract. The copy must be legible.

Checks or money orders are the only forms of payment accepted

I acknowledge that I have received and read the Horizons Condominium Rules and Regulations and specific building guidelines, prior to applying to the Association and I acknowledge that all residents and guests (including children) of this unit will abide by the regulations.

Print Name (Applicant)	Signature (Applicant)	Date
Print Name (Spouse/Additional Applicant)	Signature (Spouse/Additional Applicant)	Date
Print Name (Additional Applicant)	Signature (Additional Applicant)	Date
Print Name (Additional Applicant)	Signature (Additional Applicant)	Date

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APPLICATION FEES, DEPOSITS & OTHER FEES
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<u>PROCESSING FEE</u>	\$50.00	<i>(Payable to Miami Management)</i>
<u>APPLICATION FEE</u>		<i>(Payable to Horizons #4 Condominium)</i>
Single person	\$100.00	
Married Couple	\$100.00	
<i>(Copy of marriage certificate required)</i>		
Additional Applicant(s)	\$100.00 ea.	
<i>**Additional fees may apply for international background checks.**</i>		
<u>SECURITY DEPOSIT (RENTALS ONLY)</u>	\$250.00	<i>(Payable to Horizons #4 Condominium)</i>
Provided by tenant		
(Refundable)		
<u>VEHICLE ENTRY DECAL FEE</u>		<i>(Payable to Horizons POA)</i>
Owners	\$20.00	
Tenants	\$40.00	
<i>**All vehicles must have a decal. The decals are issued to residents only. They are non-transferable & non-refundable. Decals are deactivated from system once the resident moves out and/or lease expires.</i>		
<u>TENNIS COURT KEY</u>	\$15.00	<i>(Payable to Horizons POA)</i>

MONEY ORDER OR CHECK ONLY

CREDIT CARDS OR CASH ARE NOT ACCEPTED

Print Name (Applicant)	Signature (Applicant)	Date
Print Name (Spouse/Additional Applicant)	Signature (Spouse/Additional Applicant)	Date
Print Name (Additional Applicant)	Signature (Additional Applicant)	Date
Print Name (Additional Applicant)	Signature (Additional Applicant)	Date

HORIZONS CONDOMINIUM #4 ASSOCIATION INC.

8015 SW 107 AVE. Miami, FL 33173

APPLICATION FOR OCCUPANCY, PURCHASE, LEASE, GIFT, DEVISE OR INHERITANCE

APPLICATION FOR OCCUPANCY

FOR A SINGLE APPLICANT OR A MARRIED COUPLE

NOTE: Complete all questions and fill in all blanks. If any question is not answered or left blank, this application may be returned, not processed, and/or not approved. Print legibly or type all information. Missing information will cause delays. All information on this application will be verified.

Unit Number: _____ Property Address: 8015 SW 107 Ave Miami, FL 33173
No. of people who will occupy unit: _____ No. of adults (age 18 or older): _____ No. of children: _____
Please check: Purchasing: _____ Purchasing for investment: _____ Renting: _____
In Case of emergency notify: _____ Address: _____ Phone: _____

PART 1 - SINGLE APPLICANT OR MARRIED COUPLE - APPLICANT INFORMATION

Applicant Name: _____ Date of Birth: _____ Social Security #: _____
() Single () Married () Separated () Divorced () Widow(er) () Maiden Name: _____
Tel: _____ Cell: _____ Work: _____ Email: _____
Driver's License Number: _____ State: _____
Have you ever been arrested or convicted of a crime: Date(s): _____ County/State convicted in: _____
Charge (s): _____

Spouse's Name: _____ Date of Birth: _____ Social Security #: _____
() Single () Married () Separated () Divorced () Widow(er) () Maiden Name: _____
Tel: _____ Cell: _____ Work: _____ Email: _____
Driver's License Number: _____ State: _____
Have you ever been arrested or convicted of a crime? Date(s): _____ County/State convicted in: _____
Charge (s): _____

PART 2 - SINGLE APPLICANT OR MARRIED COUPLE - RESIDENCE HISTORY

Present Address: _____
Apt. or Condo Name: _____ Home Phone: _____
Dates of Residency: From _____ to _____ Monthly Rent/Mortgage Amount _____
Name of Landlord/Mortgage: _____ Phone: _____

Previous Address: _____
Apt. or Condo Name: _____ Home Phone: _____
Dates of Residency: From _____ to _____ Monthly Rent/Mortgage Amount _____
Name of Landlord/Mortgage: _____ Phone: _____

HORIZONS CONDOMINIUM #4 ASSOCIATION INC.

8015 SW 107 AVE. Miami, FL 33173

APPLICATION FOR OCCUPANCY, PURCHASE, LEASE, GIFT, DEVISE OR INHERITANCE

APPLICATION FOR OCCUPANCY

FOR A SINGLE APPLICANT OR A MARRIED COUPLE WITH THE SAME LAST NAME ONLY

PART 3 - SINGLE APPLICANT OR MARRIED COUPLE - EMPLOYMENT HISTORY

Applicant

Name of employer: _____ Phone: _____ Fax: _____
Address: _____ City: _____ State: _____ Zip _____
Position: _____ Name of supervisor: _____

Spouse

Name of employer: _____ Phone: _____ Fax: _____
Address: _____ City: _____ State: _____ Zip _____
Position: _____ Name of supervisor: _____

PART 4 - SINGLE APPLICANT OR MARRIED COUPLE - AUTHORIZATION

If this application is not legible or is not completely and accurately filled out, Background/Credit Search Service company (and the 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(s) recognize that the Association and the Background/Credit Search Service company will investigate the information supplied by the applicant, and a full disclosure of pertinent facts will be made to the Association. The investigation may be made of the applicant's character, general reputation, personal characteristics, good credit standing, police arrest record and mode of living as applicable. This form is for the exclusive use of the Background/Credit Search Service company.

Print Name (Applicant)

Signature (Applicant)

Date

Print Name (Spouse)

Signature (Spouse)

Date

HORIZONS CONDOMINIUM #4 ASSOCIATION INC.

8015 SW 107 AVE. Miami, FL 33173

APPLICATION FOR OCCUPANCY, PURCHASE, LEASE, GIFT, DEVISE OR INHERITANCE

APPLICATION FOR OCCUPANCY ADDITIONAL APPLICANTS

NOTE: Complete all questions and fill in all blanks. If any question is not answered or left blank, this application may be returned, not processed, and/or not approved. Print legibly or type all information. Missing information will cause delays. All information on this application will be verified.

Unit number _____ Property Address: 8015 SW 107 Ave. Miami, FL 33173

PART 1 – ADDITIONAL APPLICANT – APPLICANT INFORMATION

Applicant Name: _____ Date of Birth: _____ Social Security #: _____

() Single () Married () Separated () Divorced () Widow(er) () Maiden Name: _____

Tel: _____ Cell: _____ Work: _____ Email: _____

Driver's License Number: _____ State: _____

Have you ever been arrested or convicted of a crime: Date(s): _____ County/State convicted in: _____

Charge (s): _____

PART 2 – ADDITIONAL APPLICANT - RESIDENCE HISTORY

Present Address: _____ Phone: _____

Apt. or Condo Name: _____ Phone: _____

Dates of Residency: From _____ to _____ Name of Landlord/Mortgage: _____

Rent/Mortgage Amount _____

Previous Address: _____ Home Phone: _____

Dates of Residency: From _____ to _____ Monthly Rent/Mortgage Amount _____

Name of Landlord/Mortgage: _____ Phone: _____

PART 3 - ADDITIONAL APPLICANT - EMPLOYMENT HISTORY

Name of employer: _____ Phone: _____ Fax: _____

Address: _____ City: _____ State: _____ Zip _____

Position: _____ Name of supervisor: _____

PART 4 – ADDITIONAL APPLICANT - AUTHORIZATION

If this application is not legible or is not completely and accurately filled out, Background/Credit Search Service company (and the 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 recognize that the Association and the Background/Credit Search Service company will investigate the information supplied by the applicant, and a full disclosure of pertinent facts will be made to the Association. The investigation may include the applicant's character, general reputation, personal characteristics, good credit standing, police arrest record and mode of living as applicable. This form is for the exclusive use of the Background/Credit Search Service company.

Print Name (Additional Applicant)

Signature (Additional Applicant)

Date

HORIZONS CONDOMINIUM #4 ASSOCIATION INC.

8015 SW 107 AVE. Miami, FL 33173

APPLICATION FOR OCCUPANCY, PURCHASE, LEASE, GIFT, DEVISE OR INHERITANCE

APPLICANTS: Most banks, financial institutions, mortgage companies and some employers require your signature and name printed to verify information. Please complete the form below:

AUTHORIZATION FORM

You are hereby authorized to release to the Background/Credit Search Service company any and all information they request with regards to verification of my bank account(s), credit history, residential history, criminal record history, employment verification and character references. This information is to be used for my/our credit report and/or criminal background check for my/our application for occupancy to Horizons Condominium Association, Inc.

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 Horizons Condominium Association, Inc., for their exclusive use only. **PLEASE INCLUDE A COPY OF DRIVER'S LICENSE AND SOCIAL SECURITY TO CONFIRM IDENTITY.** If a driver's license is not available, please include a copy of your Passport or current identification card.

I/We further state that 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 proper signature(s).

I/We certify under penalty of perjury that the foregoing is true and correct.

<hr/> Print Name (Applicant)	<hr/> Signature (Applicant)	<hr/> Date
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<hr/> Print Name (Spouse/Additional Applicant)	<hr/> Signature (Spouse/Additional Applicant)	<hr/> Date
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<hr/> Print Name (Additional Applicant)	<hr/> Signature (Additional Applicant)	<hr/> Date
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<hr/> Print Name (Additional Applicant)	<hr/> Signature (Additional Applicant)	<hr/> Date
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HORIZONS CONDOMINIUM #4 ASSOCIATION INC.

8015 SW 107 AVE. Miami, FL 33173

APPLICATION FOR OCCUPANCY, PURCHASE, LEASE, GIFT, DEVISE OR INHERITANCE

CURRENT UNIT OWNER INFORMATION

First Name: _____ Last Name: _____ E-mail: _____
 Mailing Address: _____ City: _____ State: _____ Zip _____
 Home Phone: _____ Work Phone: _____ Cell Phone: _____
 Agent name (if any): _____
 Address: _____ City: _____ State: _____ Zip _____
 Work Phone: _____ Cell Phone: _____

RESIDENT INFORMATION – LIST <u>ALL</u> INDIVIDUALS THAT WILL RESIDE IN UNIT, INCLUDING SELF.

Resident	Relationship	D.O.B	Resident	Relationship	D.O.B
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

RESIDENT VEHICLE INFORMATION
There is only <u>one</u> assigned parking space per unit. Only <u>one</u> vehicle per registered adult will be allowed to park in the property. In order to receive a decal you must provide a copy of your current auto registration. No commercial vehicles are allowed.

Year: _____	Year: _____
Make & Model: _____	Make & Model: _____
Color: _____	Color: _____
License Tag: _____	License Tag: _____
Year: _____	Year: _____
Make & Model: _____	Make & Model: _____
Color: _____	Color: _____
License Tag: _____	License Tag: _____

_____	_____	_____
Print Name (Applicant)	Signature (Applicant)	Date
_____	_____	_____
Print Name (Spouse/Additional Applicant)	Signature (Spouse/Additional Applicant)	Date
_____	_____	_____
Print Name (Additional Applicant)	Signature (Additional Applicant)	Date

MOVING IN/OUT, DELIVERIES, and PICKUPS

HORIZONS CONDOMINIUM #4 ASSOCIATION INC.

8015 SW 107 AVE. Miami, FL 33173

APPLICATION FOR OCCUPANCY, PURCHASE, LEASE, GIFT, DEVISE OR INHERITANCE

- **Moving hours are from 9:00 a.m. to 6:00 p.m. Monday through Saturday.**
- **There will be no moving on Sundays or major holidays (New Year's Day, Memorial Day, 4th of July, Labor Day, Thanksgiving Day and Christmas Day).**
- **All packing materials must be disposed of by the resident or moving company. You may not use the dumpsters on the property to dispose of boxes, barrels, crates or packing materials.**
- **All deliveries made to the unit are governed by the same conditions listed above.**
- **All pick-ups made to the unit are governed by the same conditions listed above.**

The Unit Owner will be responsible for the actions of and for any damage or unreasonable soil caused by a moving company and their employees or any other persons involved in the Move In/Move Out. In the case of the leasing of a Unit, the Unit Owner assumes responsibility for the actions and any damage caused by the tenant or other occupant. As required by the Horizons Condominium Association Rules and Regulation. **Residents shall notify the management office as to the time and date of moving, no less than forty-eight (48) hours prior to moving in or out, Resident must request in writing to the management office their security deposit reimbursement.**

Current Owner(s):

_____	_____	_____
Print Name	Signature	Date
_____	_____	_____
Print Name	Signature	Date

Applicant(s):

_____	_____	_____
Print Name (Applicant)	Signature (Applicant)	Date
_____	_____	_____
Print Name (Spouse/Additional Applicant)	Signature (Spouse/Additional Applicant)	Date
_____	_____	_____
Print Name (Additional Applicant)	Signature (Additional Applicant)	Date

HORIZONS CONDOMINIUM #4 ASSOCIATION INC.

8015 SW 107 AVE. Miami, FL 33173

APPLICATION FOR OCCUPANCY, PURCHASE, LEASE, GIFT, DEVISE OR INHERITANCE

Horizons Condominium Association Pet Rules and Regulations

In the event of a violation of the following terms and conditions, the Board of Directors shall have the right to immediately cancel this agreement and require the pet owner to immediately remove the pet from the premises. Cancellation of this agreement will not imply a waiver of the pet owner's responsibility for any damages.

CHECK HERE IF NO PETS: _____ SIGNATURE: _____

1. Only the pet listed and described below is authorized to reside in the unit at any point in time under this pet agreement. The Board of Directors **does not allow** additional pets.
2. Pet will not cause: damage, danger, nuisance, noise, health hazard, or soil on the common areas, catwalks, stairwells, parking areas, or landscaping. Pet is to be walked only on the **outside perimeter walls of the complex**. The owner agrees to accept full responsibility and liability for any damages, injury, or actions arising from or caused by his/her pet.
3. Each resident (regardless of the number of joint owners/occupants) shall maintain a **total of one household pet** in the unit, to **be limited to no more than twenty (20) pounds at full maturity**, regardless of type or breed. The pet is not to be kept, bred, or maintained for commercial purposes.
4. The pet **must be kept on a leash at all times** when outside the unit. **No pet may be kept on the balcony.**
 - (a) All pets must be registered at the manager's office as to breed, size and name of veterinarian, as well as a certificate of health and immunization from veterinarian (or the current Miami-Dade County license number).
 - (b) The Board of Directors shall have the right from time to time to prescribe rules and regulations with regard to size and kind of pets which may be maintained within the condominium units and with regard to the exclusion of pets from the common elements or the manner in which pets may be brought upon the common elements.
 - (c) Each condominium owner, tenant or occupant who shall own or maintain a pet within the condominium property shall indemnify the Board of Directors and hold it harmless against any loss or liability or claim of any kind or character upon the condominium property and against animal attacks or bites or any other incidents in connection therewith of like character.
 - (d) No owner, renter or occupant shall be permitted to keep a pet which shall become obnoxious or which shall create a nuisance to any other condominium unit resident.
 - (e) Any new pet brought into the complex shall weigh **NO** more than twenty (20) pounds at maturity.
 - (f) No pets allowed in the pools, tennis courts or clubhouse areas.

Please sign below that you have read and agree to the Horizons Condominium Association Pet Rules and Regulations.

Current Owner:

Print Name	Signature	Date
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Applicant(s):

Print Name (Applicant)	Signature (Applicant)	Date
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Print Name (Spouse/Additional Applicant)	Signature (Spouse/Additional Applicant)	Date
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Print Name (Additional Applicant)	Signature (Additional Applicant)	Date
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HORIZONS CONDOMINIUM #4 ASSOCIATION INC. 8015 SW 107 AVE. Miami, FL 33173

APPLICATION FOR OCCUPANCY, PURCHASE, LEASE, GIFT, DEVISE OR INHERITANCE

PET REGISTRATION FORM

COMPLETE ONLY IF YOU HAVE A PET.

PLEASE ATTACH A RECENT PET PHOTO TO THE APPLICATION.

Resident Name: _____ Unit Owner: _____
Address: 8015 S.W. 107th Avenue Miami, FL 33173 Unit No: _____
Home No: _____ Cell No.: _____ Email: _____
Breed of pet: _____ Exact weight of pet: _____ lbs. _____ oz.
Approximate weight of pet when full grown: _____ lbs. _____ oz.
Name of pet: _____ Pet age: _____ Pet color: _____
Miami-Dade County Dog Tag No: _____ Date of last rabies vaccination: _____
Name, address and phone of veterinarian: _____

The documents of Horizons Condominium state each unit is allowed to own one (1) dog or (1) cat, or other domestic pet, providing that the pet does not exceed twenty (20) pounds in weight at maturity.
(Declaration of Condominium- Rules and Regulations, Exhibit 14, Paragraph 13)

I understand that any falsification of information or failure to register my pet may result in the denial of approval by the Board of Directors of the condominium association. I am fully responsible for the actions of my pet and understand the rules and regulations regarding the control of my pet.

_____	_____	_____
Print Name (Applicant)	Signature (Applicant)	Date
_____	_____	_____
Print Name (Spouse/Additional Applicant)	Signature (Spouse/Additional Applicant)	Date
_____	_____	_____
Print Name (Additional Applicant)	Signature (Additional Applicant)	Date

Board Approval: _____
President, Horizons Condominium #4

APPROVAL GRANTED _____ APPROVAL DENIED _____

**PET OWNER MUST PROVIDE DADE COUNTY OR VETERINARIAN RECORDS FOR VACCINATIONS
AND WEIGHT.**

HORIZONS CONDOMINIUM #4 ASSOCIATION INC.

8015 SW 107 AVE. Miami, FL 33173

APPLICATION FOR OCCUPANCY, PURCHASE, LEASE, GIFT, DEVISE OR INHERITANCE

ADDENDUM TO LEASE – ONLY REQUIRED ON LEASES
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This Addendum shall serve to modify and/or supplement that certain Lease Agreement dated ___/___/___, by and between _____(hereinafter "Owner"/"Lessor") being of the owner(s) of the following unit:_____and _____(hereinafter "Lessee"/"Tenant"). Notwithstanding anything to the contrary in the aforementioned Lease Agreement, the parties hereto agree as follows:

- 1) Horizons Condominium Association, Inc. (hereinafter "Association") and/or its authorized agents shall have the irrevocable right to have access to each unit from time to time during reasonable hours as may be necessary for inspection, maintenance, repair or replacement of any Common Element therein or accessible there from, or for making emergency repairs therein necessary to prevent damage to the Common Elements or to another unit or units.
- 2) The Lessee shall not assign, mortgage or encumber this Lease, nor subject or permit the leased property or any part thereof to be used by others without the prior written approval of the Condominium Association.
- 3) The Lessee agrees not to use the demised premises, or keep anything in the unit which will increase the insurance rates of the unit or interfere with the rights of other residents of the Condominium Association by unreasonable noises or otherwise; nor shall Lessee commit or permit any nuisance, immoral or illegal act in his unit, or on the Common Elements, or the Limited Common Elements.
- 4) The Lessee covenants to abide by the Rules and Regulations of the Condominium, and the terms and provisions of the Declaration of Condominium, Articles of Incorporation and By-Laws of the Association and any other rules or guidelines of the Association and any other rules or guidelines which may become operative from time to time during said leasehold.
- 5) The parties hereto specifically acknowledge and agree that the Association is hereby empowered to act as agent of Owner/Lessor with or lessee's family or guests, with the provisions of the Declaration of Condominium, its supportive Exhibits the Florida Condominium Act and the Rules and Regulations of the Association, and this Lease, including the power to take legal action to evict the tenant.
- 6) The approval of the proposed Lease Agreement issued by the Association is to be expressly conditioned upon the Lessee's observance of the provision contained in this Addendum. Any breach of the terms hereof shall give the Association the authority to take immediate steps to prevent further breaches and/or terminate the Lease Agreement. The Owner/Lessor acknowledges that he remains ultimately responsible for the acts of Lessee and Lessee's family and guests. Owner/Lessor agrees that he remains responsible for any costs incurred by the Association, including attorneys' fees in remedying violations of this Addendum and/or violations of the condominium documents.
- 7) No more than two (2) persons per bedroom as specified in the Condominium Documents shall be allowed to occupy any unit
- 8) There shall be no changes to the Lease Agreement without the prior written approval of the Association.
- 9) The unit shall not be sublet.
- 10) A maximum of one numbered parking space (assigned) per unit.
- 11) a. All regular assessments shall be due and payable by the unit owner on the first day of each month and shall be considered in arrears after the 15th day of each month.
b. In the event a unit owner fails to timely pay assessments within 15 days of the due date as noted in the preceding paragraph, whether regular assessments or special assessments, the Association shall notify, in writing by regular mail, the unit owner of such delinquency at his most recent address known to the Association; the Association shall likewise notify by regular mail the tenant, lessee or lessees, or other authorized resident in unit.
c. Upon receipt of such notices by tenant, lessee or lessees, or other authorized resident, said tenant, etc., shall immediately pay to Horizons Condominium Association, Inc. the entire amount of such delinquent assessment whether regular or special, including late fees, interest, collection cost and attorney's fees incurred, if any, at such time as the tenant's next monthly rental payment is due from the time the tenant receives such notice.
d. The tenant, lessee or lessees are authorized to deduct such sums actually paid to the Association from the next rental payment, regardless of whether payable directly to the unit owner or to his agent.
e. In the event the tenant, lessee or lessees fail to pay delinquent assessment and costs incidental thereto as previously described, including attorneys' fees, the tenant shall be deemed in default of this Lease and subject to summary eviction proceedings and such other and further relief as the Landlord is entitled to in the event of non-payment of rent as the amounts owed pursuant hereto shall be deemed to be additional rent owed.

Initial(s): _____
App. App. App.

HORIZONS CONDOMINIUM #4 ASSOCIATION INC.

8015 SW 107 AVE. Miami, FL 33173

APPLICATION FOR OCCUPANCY, PURCHASE, LEASE, GIFT, DEVISE OR INHERITANCE

- f. Horizons Condominium Association, Inc. shall have the irrevocable right to act on behalf of the Landlord (unit owner) in the event such eviction proceedings are necessary, and this power shall be deemed an irrevocable agency coupled with interest.
- g. In the event such eviction proceedings or other actions are necessary, the prevailing party shall be entitled to attorney's fees and costs.
- h. UNIT OWNER expressly absolves TENANT from any liability to UNIT OWNER for unpaid rent under the Lease Agreement if such payment is made directly to the Association upon demand from the Association.

In witness whereof, the respective parties have hereunto set their hands and seals this ____ day of _____, 20____. Signed, Sealed and Delivered in the Presence of:

Current Owner(s):

Print Name (Owner)

Signature (Owner)

Print Name (Owner)

Signature (Owner)

CERTIFICATE OF NOTARY PUBLIC

BEFORE ME, the authorities mentioned above personally appeared. Who being first duly sworn under oath, deposes that they have read the above affidavit and the facts contained and says therein are true and correct.

The authorities are ____ personally known to me, or ____ produced the following Identification:

Notary Seal:

Signature of Notary
Notary Public for the State of Florida
My commission expires: _____

In witness whereof, the respective parties have hereunto set their hands and seals this ____ day of _____, 20____. Signed, Sealed and Delivered in the Presence of:

Lessee:

Print Name (Applicant)

Signature (Applicant)

Print Name (Spouse/Additional Applicant)

Signature (Spouse/Additional Applicant)

Print Name (Additional Applicant)

Signature (Additional Applicant)

Print Name (Additional Applicant)

Signature (Additional Applicant)

CERTIFICATE OF NOTARY PUBLIC

BEFORE ME, the authorities mentioned above personally appeared. Who being first duly sworn under oath, deposes that they have read the above affidavit and the facts contained and says therein are true and correct.

The authorities are ____ personally known to me, or ____ produced the following Identification:

Notary Seal:

Signature of Notary
Notary Public for the State of Florida
My commission expires: _____