

The Mainlands of Tamarac by the Gulf Association, Inc.  
Unit 1 Interview Committee  
9650 Mainlands Boulevard West  
Pinellas Park, FL 33782-4111  
[www.themainlands.com](http://www.themainlands.com)

## **Application Packet for Buyers and Renters**

Welcome to Mainlands Unit 1. An interview is required by the State of Florida and this provides a chance for you to meet each other. During the interview we will be going over the rules and answer any questions you may have. The interview will last about an hour and will be conducted by us at the Clubhouse (at the address above). This packet has been prepared for you to expedite the process.

The ***Request for Approval of Ownership Transfer*** or Lease form must have as much information as possible filled in. The signature of the Seller(s) and of the Buyers(s) is required on this form. If the Buyer is a Corporation or an LLC, a current copy of the Corporate Banking Resolution or Florida LLC Annual Report must accompany the application, showing who is authorized to sign on behalf of the Corporation. If the Buyer intends to renovate/resell the property, and addendum must accompany the application.

The ***Information and Emergency Contact*** form needs to be completed and submitted before the interview.

The ***applyCHECK Background Screening Authorization*** form must be completed for each person purchasing or renting and a photocopy of each person's driver's license.

There is a \$100 NON-REFUNDABLE application fee. A check or money order made payable to MAINLANDS UNIT 1 must accompany the application.

When filling out and signing the forms, if there is anything that does not apply to you, please mark DNA in the space. It is important that these forms and the \$100 payment be returned to us as soon as possible as the interview process and approval MUST be completed before a closing can be held. You might consider making a copy of the signed forms for your records.

REMINDER – Homes may NOT be rented out by the Purchaser during the first year of ownership.

Completed forms can be mailed or dropped off at our home:

Suzy and Ron Wenner  
9675 44<sup>th</sup> St N  
Pinellas Park, FL 33782

After receipt of the completed forms, and a successful background check, we will call you to schedule the interview. During the interview we will have some additional forms to fill out and a lot of information on the great neighborhood you are moving to.

If you have questions on any of these forms, please call us. We look forward to welcoming you to Mainlands of Tamarac by the Gulf Unit 1.

With kind regards,

*Suzy and Ron Wenner*

Interview Team

Email: [suzy.mainlands@gmail.com](mailto:suzy.mainlands@gmail.com)

Phone: 956.655.1163

REQUEST FOR APPROVAL OF OWNERSHIP TRANSFER OR LEASE

MAINLANDS OF TAMARAC BY THE GULF UNIT 1 ASSOCIATION, INC.

10161 49th STREET NORTH SUITE L, PINELLAS PARK, FL 33782

SALES APPLICATION

RENTAL/ADDITIONAL RESIDENT APPLICATION

INTERVIEW DATE \_\_\_\_\_

FROM: \_\_\_\_\_  
SELLER/LANDLORD

TO: \_\_\_\_\_  
PURCHASER/TENANT

CONDOMINIUM ADDRESS \_\_\_\_\_ BLOCK \_\_\_\_\_ LOT \_\_\_\_\_

PROPOSED CLOSING DATE \_\_\_\_\_ (SALE) OCCUPANCY DATE (FOR RENTAL): FROM \_\_\_\_\_ TO \_\_\_\_\_

**PURCHASER(S) REPRESENT THAT THE FOLLOWING INFORMATION IS TRUE AND CORRECT AND CONSENT(S) TO FURTHER INQUIRY AND INVESTIGATION WHICH IS NECESSARY FOR APPROVAL OF THIS REQUEST:**

**A.** IS UNIT TO BE LEASED?  YES  NO IF UNIT IS TO BE LEASED, PURCHASER AGREES TO SUPPLY THE BOARD OF DIRECTORS WITH A COPY OF THE LEASE.

IF UNIT WILL NOT BE LEASED, OWNER WILL LIVE IN UNIT  PART TIME  FULL TIME

**B.** PERSONS WHO WILL OCCUPY THE ABOVE CONDOMINIUM UNIT ARE AS FOLLOWS:

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

IF ADDITIONAL PERSONS WILL OCCUPY THIS UNIT, PLEASE ATTACH A SEPARATE SHEET AS AN ADDENDUM. (A PHOTO I.D.)

**C.** PURCHASER'S/TENANT'S PRESENT ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

**D.** MAILING ADDRESS AFTER CLOSING,(IF DIFFERENT FROM CONDO ADDRESS) \_\_\_\_\_

**E.** EMPLOYED BY \_\_\_\_\_ ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

**F.** REFERENCE \_\_\_\_\_ ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

**G.** BANK REFERENCE \_\_\_\_\_ ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

**H.** AUTOMOBILE(S) MAKE: \_\_\_\_\_ LICENSE PLATE: \_\_\_\_\_

MAKE: \_\_\_\_\_ LICENSE PLATE: \_\_\_\_\_

**I.** PET(S) (IF ALLOWED) \_\_\_\_\_ WEIGHT \_\_\_\_\_

**J.** NAME AND ADDRESS OF TITLE COMPANY \_\_\_\_\_

**K.** REAL ESTATE AGENT (IF APPLICABLE) \_\_\_\_\_

PURCHASER(S) STATE THAT THEY HAVE RECEIVED A COPY OF THE UNIT DOCUMENTS, INCLUDING THE INFORMATION SECTION, RULES AND REGULATIONS, CONSOLIDATE DECLARATION OF CONDOMINIUM AND BYLAWS, ALSO A COPY OF THE FINANCIAL REPORT AND THE MOST FREQUENTLY ASKED QUESTIONS AND HAS READ, UNDERSTOOD AND AGREES TO ABIDE BY ALL THE CONDITIONS AND TERMS THEREIN AND ALL REASONABLE RULES AND REGULATIONS ENACTED HEREAFTER OFFICIALLY BY THE ASSOCIATION. LIKEWISE TENANTS STATE THEY HAVE READ AND AGREE TO ABIDE BY THE INFORMATION SECTION AND RULES AND REGULATIONS OF THE UNIT DOCUMENTS.

THIS APPROVAL IS SUBJECT TO ALL FINANCIAL OBLIGATIONS TO THE ASSOCIATION, INCLUDING, BUT NOT LIMITED TO, MAINTENANCE FEES, LATE CHARGES, SPECIAL ASSESSMENTS, LEGAL FEES, AND APPLICATION FEES HAVING BEEN PAID IN FULL OR WILL BE PAID BY CLOSING AGENT AT THE TIME OF CLOSING OF THIS SALE.

\_\_\_\_\_  
SIGNATURE OF SELLER/LANDLORD

\_\_\_\_\_  
SIGNATURE OF PURCHASER/TENANT

\_\_\_\_\_  
SIGNATURE OF SELLER/LANDLORD

\_\_\_\_\_  
SIGNATURE OF PURCHASER/TENANT

PURSUANT TO DECLARATION OF CONDOMINIUM, THE BOARD OF DIRECTORS HAVE APPROVED THE PURCHASE/LEASE OF UNIT AT:

THIS APPROVAL IS ACKNOWLEDGED BY THE DESIGNATED VOTER AT:

\_\_\_\_\_  
AND DO HEREBY CONFIRM THE SAME BY THIS DOCUMENT.

\_\_\_\_\_  
ADDRESS

BY \_\_\_\_\_

BY \_\_\_\_\_

BY \_\_\_\_\_

DESIGNATED VOTER SIGNATURE

BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_

MAINLANDS UNIT 1  
INFORMATION & EMERGENCY CONTACT

1. HOMEOWNER: \_\_\_\_\_ DOB: \_\_\_\_\_

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

2. SPOUSE/OCCUPANT: \_\_\_\_\_ DOB: \_\_\_\_\_

3. RENTER(S):

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

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

4. IF SEASONAL, PLEASE COMPLETE #4. LENGTH OF STAY: \_\_\_\_\_

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

5. PETS: \_\_\_\_\_

6. PLEASE LIST VEHICLES, MAKE AND LICENSE NUMBER:

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ LICENSE PLATE #: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ LICENSE PLATE#: \_\_\_\_\_

7. HOME KEYS IN CARE OF: \_\_\_\_\_

IN CASE OF EMERGENCY, PLEASE NOTIFY:

NAME: \_\_\_\_\_

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

TELEPHONE NUMBER: \_\_\_\_\_

PLEASE ATTACH COPY OF PHOTO ID, DRIVERS LICENSE, ETC.

Please Complete



## **TENANT/BUYER AUTHORIZATION FORM**

Write your name EXACTLY as it appears on your Driver's License (middle name required if applicable)

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Other Last Names Known By: \_\_\_\_\_

SSN: LEAVE BLANK \_\_\_\_\_ DOB (MM/DD/YYYY): \_\_\_\_\_

Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Driver License #: \_\_\_\_\_ State Issued: \_\_\_\_\_ Expires: \_\_\_\_\_

Address Applying To: \_\_\_\_\_

### **Current Residence**

Do you:  Own  Lease  Family/Friend

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Country \_\_\_\_\_

If you Lease:

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

Landlord Phone #: \_\_\_\_\_ Landlord Email: \_\_\_\_\_

Move In Date: \_\_\_\_\_ Move Out Date: \_\_\_\_\_ Monthly Rent: \_\_\_\_\_

Previous Address: \_\_\_\_\_

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PLEASE INCLUDE A COPY OF A DRIVER'S LICENSE AND OTHER GOVERNMENT ISSUED DOCUMENT TO CONFIRM YOUR IDENTITY

**DISCLOSURE REGARDING BACKGROUND INVESTIGATION**

MAINLANDS OF TAMARAC  
BY THE GULF  
UNIT ONE ASSOCIATION INC.

\_\_\_\_\_ (“the Company”) may obtain information about you from a consumer reporting agency for tenant screening purposes. Thus, you may be the subject of a “consumer report” and/or an “investigative consumer report” which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends or associates. These reports may contain information regarding your criminal history, credit history, motor vehicle records (“driving records”), and verification of your education or employment history or other background checks. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for residency is an investigation into your employment history conducted by Applycheck, LLC 57 West Timonium Road Suite 105A Lutherville-Timonium MD (786) 542-6834; or another outside organization. Information regarding Applycheck, LLC’s privacy practices (including information about whether any consumer personal information will be sent outside the U.S. or its territories) may be found at www.applycheck.com. The scope of this notice and authorization is all-encompassing, however, allowing \_\_\_\_\_ (the Company) obtain from any outside organization all manner of consumer reports and investigative consumer reports now and throughout the course of your residency to the extent permitted by law. You should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report. Before any adverse action is taken, based in whole or in part on the information contained in the consumer report, you will be provided a copy of the report, the name, address and telephone number of the reporting agency, and a summary of your rights under the Fair Credit Reporting Act.

**ACKNOWLEDGMENT AND AUTHORIZATION**

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of “consumer reports” and/or “investigative consumer reports” by the Company at any time after receipt of this authorization and throughout my residency, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, insurance company, or other party to furnish any and all background information requested by Applycheck, LLC 57 West Timonium Road Suite 105A Lutherville-Timonium MD (786)542-6834 or another outside organization acting on behalf of \_\_\_\_\_ (the Company) and/or \_\_\_\_\_ itself. I agree that a facsimile (“fax”), electronic or photographic copy of this Authorization shall be as valid as the original.

<p><u>New York and Maine applicants or tenants only:</u> You have the right to inspect and receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency identified above directly.</p>
<p><u>State of Washington applicants or tenants only:</u> You have the right to receive a complete and accurate disclosure of the nature and scope of any investigative consumer report as well as a written summary of rights of your rights and remedies under Washington law.</p>
<p><u>California applicants or tenants only:</u> By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law. <input type="checkbox"/></p>

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Print Name: \_\_\_\_\_

*Para información en español, visite [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.*

## **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 and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identify theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed

or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- **Consumer reporting agencies may not report outdated negative information.** 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 – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).

**States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:**

**TYPE OF BUSINESS:**

- 1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.
- b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:
  
2. To the extent not included in item 1 above:
  - a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks
  - b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act
  - c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations
  - d. Federal Credit Unions
  
3. Air carriers
  
4. Creditors Subject to Surface Transportation Board
  
5. Creditors Subject to Packers and Stockyards Act, 1921
  
6. Small Business Investment Companies
  
7. Brokers and Dealers
  
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations
  
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above

**CONTACT:**

- a. Consumer Financial Protection Bureau  
1700 G Street NW  
Washington, DC 20552
- b. Federal Trade Commission: Consumer Response Center – FCRA  
Washington, DC 20580  
(877) 382-4357
  
- a. Office of the Comptroller of the Currency  
Customer Assistance Group  
1301 McKinney Street, Suite 3450  
Houston, TX 77010-9050
- b. Federal Reserve Consumer Help Center  
P.O. Box 1200  
Minneapolis, MN 55480
- c. FDIC Consumer Response Center  
1100 Walnut Street, Box #11  
Kansas City, MO 64106
- d. National Credit Union Administration  
Office of Consumer Protection (OCP)  
Division of Consumer Compliance and Outreach (DCCO)  
1775 Duke Street  
Alexandria, VA 22314  
Asst. General Counsel for Aviation Enforcement & Proceedings  
Aviation Consumer Protection Division  
Department of Transportation  
1200 New Jersey Avenue, SE  
Washington, DC 20590  
Office of Proceedings, Surface Transportation Board  
Department of Transportation  
395 E Street S.W.  
Washington, DC 20423  
  
Nearest Packers and Stockyards Administration area supervisor
  
- Associate Deputy Administrator for Capital Access  
United States Small Business Administration  
409 Third Street, SW, 8th Floor  
Washington, DC 20416  
Securities and Exchange Commission  
100 F St NE  
Washington, DC 20549  
Farm Credit Administration  
1501 Farm Credit Drive  
McLean, VA 22102-5090  
FTC Regional Office for region in which the creditor operates or  
Federal Trade Commission: Consumer Response Center – FCRA  
Washington, DC 20580  
(877) 382-4357