

**GREENTREE VILLAS CONDOMINIUM ASSOCIATION, INC. APPLICATION**

APPLICANT MUST BE 55 YEARS+ APPLICATION MUST BE FULLY COMPLETED & RETURNED ALONG WITH ANY REQUIRED DOCUMENTATION AND A SCREENING FEE OF \$100 PER PERSON, OR \$100 PER MARRIED COUPLE

Unit # \_\_\_\_\_ I have received a copy of the Documents and any Rules by Owner  Yes  No

Owner: \_\_\_\_\_ Unit Address: \_\_\_\_\_ Date: \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Over 55 ( ) No ( )

Phone: \_\_\_\_\_ \*Social Security: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

\* If International please provide Passport Number instead.

**Co-Applicant / Spouse Name:** \_\_\_\_\_

Address: \_\_\_\_\_ Over 55 ( ) No ( )

Phone: \_\_\_\_\_ \*Social Security: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Names of other occupants who will reside in unit:

Name: \_\_\_\_\_ Age: \_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_

3 Personal References:

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Automobile Information: Please note parking rules are strictly enforced. All vehicles must be parked in the driveway, garage or (with a temporary permit) at the clubhouse overnight. There is no overnight street parking allowed. In addition, the rules prohibit the overnight parking of any Trucks, Trailer, Motorhome, Camper or Boat anywhere on property.**

Type of Vehicle(s): \_\_\_\_\_

**BROWNS BACKGROUND CHECKS CONSENT TO OBTAIN CONSUMER REPORT ON SUBSCRIBER  
GREENTREE VILLAS CONDOMINIUM ASSOCIATION, INC.**

I understand that you may obtain consumer reports that relate to my credit and/or criminal history. This information will, in whole or in part, be obtained from AISS, a Sterling Infosystems Company, 6111 Oak Tree Blvd. 4th floor. Independence, OH 44131, telephone 870-853-3228. I understand that you may be requesting information from various Federal, State and other agencies or institutions, which maintain public and non-public records concerning my past activities relating to my credit and/or criminal history. This information will be reviewed by the Association and may be reviewed by a Unit owner if it is a rental.

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Co-Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

- A. You have the right to reject this application for any cause whatsoever, and you shall not incur any liability with such rejection.
- B. No pets are allowed. Emotional Support Animal owners must apply for an accommodation by submitting legal documentation to the Office.
- C. Purchaser and all persons occupying the Unit will be required to have a personal interview before the Association will grant approval.
- D. By signing this form, all persons who will occupy the Unit agree that they understand and will follow all the Rules and Regulations of the Association. Were you given a set of Association governing documents? The Unit Owner must provide you a copy. Read them before you sign a Contract. Form updated 9/8/20