

Lyndhurst H Condominium Association
Century Village East, Deerfield Beach, FL 33442

[January 2024]

APPLICATION FOR: UNIT NUMBER: _____ LYNDHURST H

CHECK ONE (What's this application for?):

PURCHASE: _____ TRANSFER: _____ RENTAL: _____ OCCUPANT: _____

CURRENT OWNERS:

Names(s): _____

Present Address of Current Owner(s): _____

City _____ State/Prov. _____ Zip/Postal Code: _____ Country _____

Phone _____ Email: _____

APPLICANT'S INFORMATION:

a. Purchaser's name, and age: _____

b. Purchaser's name, and age: _____

Present Address: _____

City _____ State/Prov. _____ Zip/Postal Code: _____ Country _____

Phone Number: _____ Email address: _____

Social Security/Insurance #: a. _____ b. _____

If this application is for a Purchase or Transfer, please complete:

Title Co./FL Attorney: _____ Closing Date: _____

Address: _____ Phone: _____

Number of months Purchaser will occupy unit per year: _____

Names and ages of ALL occupants in residence: _____

Ages of children of occupant(s): _____

Have you ever been convicted of a felony? ☐ Yes ☐ No If YES, give details on conviction.

Have you ever served time in prison? ☐ Yes ☐ No If YES, give details of offense.

Are you on parole? [] Yes [] No Are you on probation? [] Yes [] No

Addresses of Other CVE Units Owned by Purchasers: _____

Bank References: Please provide a letter from your bank stating that you are in “good standing”. If you deal with more than one bank, please provide a second reference.

Social References: Provide 3 references, complete with addresses with zip codes and apartment numbers and phone numbers.

NO RELATIVES, PLEASE!

1. _____
2. _____
3. _____

PURCHASER(S) **MAY NOT OCCUPY** THE UNIT **UNTIL THE LYNDHURST H CONDOMINIUM ASSOCIATION BOARD** HAS ISSUED A **CERTIFICATE OF APPROVAL** OF OCCUPANCY AND, IN THE CASE OF A PURCHASE OR TRANSFER, CLOSING HAS BEEN COMPLETED. SUBMISSION OF THIS FORM IS **NOT** TO BE CONSIDERED AS APPROVAL BY THE BOARD.

FOR AMERICAN CITIZENS

INCLUDE A **NON-REFUNDABLE** \$150 (PER APPLICANT OR PER MARRIED COUPLE) **U.S. FUNDS ONLY CHECK** MADE PAYABLE TO: **SEACREST SERVICES, INC.** FOR THE INVESTIGATIVE FEE (CRIMINAL AND CREDIT CHECKS).

FOR NON-AMERICAN CITIZENS

INCLUDE A **NON-REFUNDABLE** \$150 (PER APPLICANT OR PER MARRIED COUPLE) **U.S. FUNDS ONLY CHECK** MADE PAYABLE TO: **SEACREST SERVICES, INC.** FOR THE INVESTIGATIVE FEE (CRIMINAL AND CREDIT CHECKS)
If you are Canadian please note: We will be doing a Premium CPIC criminal background check on you. You are required to complete the "Consent to Disclosure of Personal Information" form. If you have a criminal record in Canada, you are also required to complete the "Declaration of Criminal Record" form.

Purchaser signature

Date

Purchaser signature

Date

Association Director's Name

Signature

Title

Date

**ORIGINAL APPLICATION MUST BE SUBMITTED FOR PROCESSING / NO PHOTOCOPIES
30 DAY INVESTIGATION PERIOD IS REQUIRED NO EXCEPTIONS.**

PLEASE PRINT CLEARLY AND RETURN THIS APPLICATION AND ALL ATTACHMENTS TO:

SEACREST SERVICES, INC.
6601 Lyons Road, Suite A7
Coconut Creek, FL 33073
Phone # (888) 928 6465, extension 200