



**THE BLUE GALEON CONDOMINIUM ASSOCIATION, INC.  
753 N.W. 3 STREET, MIAMI, FL 33128**

**CONDOMINIUM APPLICATION**

- AN APPLICATION MUST BE COMPLETED BY ALL WHO WILL OCCUPY THIS UNIT. IF A MARRIED COUPLE, ONE APPLICATION MUST BE SUBMITTED FOR BOTH INDIVIDUALS. IN ANY OTHER TYPE OF RELATIONSHIP, AN APPLICATION PER INDIVIDUAL MUST BE SUBMITTED.
- APPLICATION PROCESSING TIME IS APPROXIMATELY TEN (10) BUSINESS DAYS. YOUR APPLICATION MUST BE APPROVED BY THE ASSOCIATION. THE BOARD OF DIRECTORS MAY ASK TO INTERVIEW YOU (AND ANY OTHER APPLICANT) BEFORE YOU ARE APPROVED TO FINALIZE A SALE, RENTAL AGREEMENT AND MOVE IN.
- IF YOU RENT AND MOVE IN BEFORE YOUR APPLICATION IS APPROVED OR YOU ARE INTERVIEWED, THE OWNER WILL BE NOTIFIED AND THE ASSOCIATION'S ATTORNEY MAY FILE A THIRTY (30) DAY EVICTION ORDER AND/OR THE OWNER WILL BE FINED \$100.00 FOR VIOLATION OF CONDOMINIUM RULES AND REGULATIONS.
- NOT MORE THAN TWO (2) INDIVIDUALS MAY OCCUPY A ONE (1) BEDROOM UNIT, AND NOT MORE THAN FOUR (4) INDIVIDUALS MAY OCCUPY A TWO (2) BEDROOM UNIT, (AS PER MIAMI-DADE COUNTY DEPARTMENT OF HOUSING).

**COMPLETE THIS APPLICATION AND RETURN TO THE CONDO ASSOCIATION ACCOMPANIED BY THE FOLLOWING:**

- COPY OF DRIVER'S LICENSE(S)
- ORIGINAL POLICE RECORD(S) (MAY BE OBTAINED FROM ANY LOCAL POLICE STATION)
- COPY OF THE LEASE OR SALE CONTRACT
- CASHIER'S CHECK OR MONEY ORDER PAYABLE TO: THE BLUE GALEON CONDOMINIUM ASSOCIATION IN THE AMOUNT OF \$150.00 (ONE HUNDRED AND FIFTY DOLLARS). PAYMENT IS ONE (1) PER APPLICATION AND NOT REFUNDABLE.
- MOVING IN – DAMAGES – if there are any damages while the resident (tenant or owner) moves in or out, the owner of the apartment will be liable for the cost of repairs.

**PLEASE PRINT**

TODAY'S DATE: \_\_\_\_\_ APT. NO. \_\_\_\_\_

IF PURCHASING, WILL THE APPLICANT BE OCCUPYING THIS UNIT? \_\_\_\_\_ YES \_\_\_\_\_ NO.

MOVE IN DATE: \_\_\_\_\_

**APPLICANT INFORMATION**

FULL NAME: \_\_\_\_\_ MARITAL STATUS: \_\_\_\_\_

DRIVER'S LICENCE NO. \_\_\_\_\_

SOCIAL SECURITY NO. \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ CELL/WORK NUMBER: \_\_\_\_\_

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

PRESENT LANDLORD NAME AND TELEPHONE NUMBER: \_\_\_\_\_

**CO-APPLICANT (SPOUSE) INFORMATION**

FULL NAME: \_\_\_\_\_ MARITAL STATUS: \_\_\_\_\_

DRIVER'S LICENCE NO. \_\_\_\_\_

SOCIAL SECURITY NO. \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ CELL/WORK NUMBER: \_\_\_\_\_

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

PRESENT LANDLORD NAME AND TELEPHONE NUMBER: \_\_\_\_\_

- ***NOTE:*** ADDITIONAL APPLICANTS MUST COMPLETE AND SUBMIT SEPARATE APPLICATIONS, EACH WITH ITS CORRESPONDING FEE AND REQUIRED DOCUMENTATION.

**PETS**

PETS ARE ALLOWED IN OUR BUILDING AS LONG AS SUCH DO NOT BECOME A NUISANCE TO THE OTHER RESIDENTS. DOGS ARE SUBJECT TO A LIMIT OF 1 PER APARTMENT, 30 LBS AT ADULT WEIGHT (CONFIRMED BY A VETERINARY LETTER), AND OWNER MUST PROVIDE INITIAL AND YEARLY PROOF OF CURRENT VACCINES.

IF RENTING, PET AUTHORIZATION MUST ALSO BE GRANTED IN LEASE AGREEMENT.

CHECK ONE: \_\_\_\_\_ DOG \_\_\_\_\_ CAT \_\_\_\_\_ BIRD \_\_\_\_\_ OTHER (SPECIFY).

\_\_\_\_\_/\_\_\_\_\_(Initials here) I / we have received a copy of the Rules and Regulations of The Blue Gaeon Condominium Association.

I hereby authorize The Blue Gaeon Condominium Association to obtain a consumer report, and any other information it deems necessary, for the purpose of evaluating my application. I understand that such information may include, but is not limited to, credit history, civil and criminal information, records of arrest, rental history, employment / vehicle records, licensing records, and/or any other necessary information. I understand that subsequent consumer reports may be obtained and utilized under this authorization in connection with an update, renewal, extension or collection with respect or in connection with the rental or lease of a residence for which this application was made. I hereby, release The Blue Gaeon Condominium Association Inc., its employees, the Board of Directors, and any procurer or furnisher of information, from any liability what-so-ever in the use, procurement, or furnishing of such information, and understand that my application information may be provided to various local, state, and/or federal government agencies including without limitation, various law enforcement agencies.

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-applicant (spouse) signature

\_\_\_\_\_  
Date