

CIELO COMMUNITY ASSOCIATION Inc.
OWNERSHIP TRANSFER APPLICATION PROCEDURES, FEES AND REQUIREMENTS

This application will not be processed until every item on the checklist has been provided.

The applicant is responsible to have the application and supporting materials submitted 30 days prior to proposed closing. Occupancy is not permitted prior to approval. Each prospective owner must submit an application.

CONTACT INFORMATION:

Bristol Management Services, Inc.
1930 Commerce Lane, Suite 1
Jupiter, FL 33458

Phone: (561) 575-3551 Fax: (561) 575-5423

1. All prospective owners in Cielo must complete an Ownership Transfer Application. Application fees are due for each adult property owner and /or resident.
2. Upon completion of all required forms, please submit application to Bristol Management.
3. Submit with your application the required, non-refundable application fee of \$100.00 per applicant, 18 years and older, payable to Cielo CA, Inc, by money order or secured funds only.
4. Submit a legible copy of your driver's license and social security card. This information is required to complete your background check. If not a U.S. citizen, submit a legible copy of your passport and visa.
5. Submit one of the following for income verification: Personal Tax Return, W2 or recent checks stubs.
6. Cielo Community Association, Inc. (CCA) assessments must be current and all fines must be paid in full prior to occupancy.
7. All Adult applicants, 18 years and older, are required to be interviewed in person by a member, or members, of the Cielo Interview Committee, prior to occupancy.

CCA, INC. CHECK LIST OF REQUIRED ITEMS:
(MANAGEMENT CANNOT SUBMIT INCOMPLETE APPLICATIONS TO THE OWNERSHIP TRANSFER REVIEW BOARD FOR CONSIDERATION.)

CCA, Inc. Check List of Required Items (signed by ALL adult applicants)

Completed and signed **CCA, INC. Inc. OWNERSHIP TRANSFER APPLICATION** (one by EACH adult applicant)

Completed and signed **CCA, INC. Inc. BACKGROUND INVESTIGATION AND CREDIT REPORT AUTHORIZATION FORM** (one by EACH adult applicant)

- Copy of **DRIVER'S LICENSE** and **SOCIAL SECURITY CARD** for EACH adult applicant.
- Copies of Personal Tax Return, W2 or check stubs for income verification** for EACH adult applicant.
- \$100.00 non-refundable APPLICATION FEE** (one by EACH applicant)
Payable to CCA, Inc. Inc., Inc. Secured funds only.

APPLICANTS' SIGNATURE: _____

Date: _____

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Date: _____

CCA, INC. Inc. OWNERSHIP TRANSFER APPLICATION

**C/o Bristol Management
1930 Commerce Lane, Suite 1
Jupiter, FL 33458
(561) 575-3551 * Fax (561) 575-5423**

All prospective owners in Cielo must fill out an application.

PLEASE PRINT LEGIBLY

DATE: _____

PROPERTY ADDRESS:

Palm Beach Gardens, Florida 33418

**APPLICATIONS MUST INCLUDE THE CURRENT CONTACT
INFORMATION OF THE PROPERTY OWNER:**

Address: _____

Phone: _____

Email: _____

The prospective Owner must complete the following:

Name (Last) _____ First _____ (MI) _____

Date of Birth _____ Telephone Number _____

Present Address: _____

Email: _____

The prospective Owner must complete the following:

Spouse's Name (Last) _____ First _____ (MI) _____

Date of Birth: _____ Telephone Number _____

Email address: _____

Name(s) of Children _____ D.O.B. _____
_____ D.O.B. _____
_____ D.O.B. _____

If there are any other adult occupants of the property, please complete:

Name(s) _____ D.O.B. _____
_____ D.O.B. _____
_____ D.O.B. _____

If there are any pets to be maintained at the property, please complete:

A picture of all pets which indicates the size of each pet must be attached to this application. There are pet restrictions in the community. It is the Owner's responsibility to understand and abide by the governing documents and any pet restrictions.

Number of Pets _____ Breed _____ / _____ Weight _____ / _____

VEHICLE INFORMATION:

Please be aware that there are restrictions on certain types of vehicles and parking inside the community. It is the Owner's responsibility to understand and abide by the governing documents and any restrictions that may apply.

Automobile #1: Make _____ Model _____ Year _____

License #: _____ State: _____

Automobile #2: Make _____ Model _____ Year _____

License #: _____ State: _____

PERSONS TO NOTIFY IN CASE OF EMERGENCY

1. _____ Tel # _____

2 _____ Tel # _____

RESIDENCE HISTORY

PLEASE PRINT FULL ADDRESS, INCLUDING UNIT/APT NUMBER, CITY, STATE & ZIP CODE

Present address: _____

Apt or Condo Name: _____

Phone: _____

Dates of Residency: From: _____ **To:** _____

Circle one:

Own Home Parent/Family Member Rented Home Rented Apt. Other

Rent Amount \$ _____ **per month**

Name of Landlord: _____

Address: _____

_____ **Phone:** _____

Previous address: _____

Apt or Condo Name: _____

Phone: _____

Dates of Residency: From: _____ **To:** _____

Circle one:

Own Home Parent/Family Member Rented Home Rented Apt. Other

Rent Amount \$ _____ **per month**

Name of Landlord: _____

Address: _____

_____ **Phone:** _____

EMPLOYMENT HISTORY

PLEASE PRINT FULL ADDRESS, INCLUDING UNIT/APT NUMBER, CITY, STATE & ZIP CODE

Present Employer: _____

Address: _____

_____ **Phone:** _____

Dates of Employment: From:_____ **To:**_____

Income \$_____ **per month**

Previous Employer: _____

Address: _____

_____ **Phone:** _____

Dates of Employment: From:_____ **To:**_____

Income \$_____ **per month**

CRIMINAL HISTORY

Have you ever been convicted of a crime: _____ **If yes, provide details:**

By signing this application Owner agrees to abide by all Rules and Regulations of the Cielo Community

Owner Signature:

Date

FOR OFFICE USE ONLY

HOA Assessments past due: \$ _____

Fines past due: \$ _____

Check # _____ (Application Fee) \$100 per applicant

The Board of Directors hereby approves the ownership transfer of the above property.

Board Member – Title

Date

CCA, INC. Inc.

BACKGROUND INVESTIGATION AND CREDIT REPORT AUTHORIZATION FORM
PLEASE PRINT LEGIBLY

APPLICANT:

Name (Last) _____ First _____ (MI) _____

Date of Birth _____ Telephone Number _____

Present Address: _____

Social Security Number: _____

Drivers License: _____

I authorize **CCA, Inc.**, to conduct a background investigation on myself which may include, but is not limited to the following areas:

A background security interview, civil records check, employment reference checks, education records check, character reference checks, salary / wage verification, Local, State and National criminal records check, motor vehicle records check, credit bureau records check, neighborhood reference check and immigration and naturalization service records.

I do hereby release, absolve and agree to forever hold harmless **CCA, Inc.**, their officers, agents, employees and representatives and the **Cielo Committees** including their officers, agents and employees from any liability resulting either from the background investigation or use of the results and opinions obtained there from. This also applies to any and all suits, actions, or causes of actions at law, claim, demand or liability which I, my successors, assigns, heirs, executors, guardians or administrators have now or may ever have resulting directly, indirectly or remotely from said background investigation. I authorize any reference listed above to release any information requested by **CCA, Inc.**, I release and forever hold harmless any reference providing information to **CCA, Inc.**

I certify that the information contained in the **CCA, Inc.**, Ownership Transfer Application (and associated forms and releases) are true and correct to the best of my knowledge, and I understand any falsification, misrepresentation or omission is grounds for refusal to approve this Ownership Transfer Application.

I further authorize **CCA, Inc.**, and their representatives to perform a third party investigation through the provider of their choice and to release all results, oral and written statements, opinions and other information derived from this background investigation to the Board of Directors of the **CCA, Inc.**, and the applicable **Cielo Committees**.

APPLICANT Signature:

Date: _____