## PORT MALABAR HOLIDAY PARK MOBILE HOME PARK RECREATION DISTRICT

A community intended and operated for persons 55 and older

215 Holiday Park Blvd. NE Palm Bay, Florida 32907 Phone: 321-724-2240 Fax: 321-724-8166 E-mail: holidaypark@holidayparkfl.com



## APPLICATION FOR <u>RENTAL or NON-OWNER</u>

A \$50.00 Per Applicant-Non-Refundable Application Fee is due when form is submitted to the office

Long Term rental effective date:

Initial Season 20\_\_\_/ 20\_\_\_

Re-Certification Season 20 / 20

Re-Certification Season 20\_\_/ 20\_\_\_ Re-Certification Season 20\_\_/ 20\_\_

Re-Certification	Season	20	/ 20	

Property Address:

THE UNDERSIGNED HEREBY MAKES APPLICATION TO THE BOARD OF TRUSTEES TO OCCUPY A UNIT IN PORT MALABAR HOLIDAY PARK MOBILE HOME PARK RECREATION DISTRICT - HEREAFTER KNOWN AS HOLIDAY PARK

1. Name(s) of Applicant(s): (Please print clearly)

1st				
	LAST NAME	FIRST NAME	MIDDLE INITIAL	DOB
2nd				
	LAST NAME	FIRST NAME	MIDDLE INITIAL	DOB

PLEASE NOTE: Each Applicant shall attach to this application a photocopy of a bona fide personal identification including name, birth date, and (if practicable) a portrait photograph. Acceptable forms of identification include driver's license, passport, Birth Certificate or other Government Issued identification. Holiday Park is a public body subject to the Florida Public Records Law and therefore its records are open for public inspection to the extent not exempt from disclosure under Chapter 119 of the Florida Statutes.

### **APPLICANT'S PERSONAL HISTORY:**

2. Current Home Address:		
(Street)	(City)	(State) (Zip Code)
3. [ ] Current Home Telephone Number: ()		_
4. [ ] Cell Phone Number: ()		
5. Email address:		
Applicant's InitialsInitials		

# **CREDIT REPORT AUTHORIZATION FORM**

Applicant #1 Name :		
Social Security Number:	Date of Birth:	_
Current Street Address:	<u>City</u> : <u>State</u> :	
Signature Applicant #1:	Date:	
Applicant #2 Name :		
Social Security Number:	Date of Birth:	_
Current Street Address:	<u>City</u> : <u>State</u> :	
Signature Applicant #2:	Date:	

6. There are rules and regulations regarding the keeping of pets as listed in Article III, Restrictions on Use of Lots per the "Deed Restrictions" in the "Information Packet".

Does Proposed Occupant Own a Pet? Yes\_\_\_\_ No\_\_\_\_

If Yes, What Breed?\_\_\_\_\_ Height\_\_\_\_\_ Weight\_\_\_\_\_

License number: \_\_\_\_\_\_ (Please provide a copy of license with your application)

NOTE: If at any time your pet exceeds the twenty five (25) pounds mature weight, he / she may be subject to removal from Holiday Park. Registered service dogs are exempt from the twenty five (25) pound restriction.

#### **DETAILS OF PROPERTY OWNER:**

- 6. Name of Owner: \_\_\_\_\_
- 7. Signature of Owner: \_\_\_\_\_

Owners who are renting their property must notify the District Office by mail, fax of e-mail of when the tenant will be staying in Holiday Park.

<u>Tourist Development Tax:</u> Rentals for six (6) months or less are subject to a 5% Resort tax. This tax is collected by the Brevard County Tax Collector pursuant to Brevard County Code, Chapter 102, "Taxation", Article III, as authorized by Florida Statute 125.0104. This 5% tax is in addition to the 7% State of Florida Sales and Use Tax remitted to the Florida Department of Revenue.

#### INFORMATION CONCERNING INTENDED OCCUPANCY:

8. (Including owner(s) will anyone other than the person(s) on this application be occupying the dwelling unit?

Please check Yes or No :\_\_\_\_\_ (Yes) \_\_\_\_\_ (No)

If Yes, Provide Name, Age(s) and Relationship to you:

Name	Age	Relationship
Anticipated Length of Stay: () 3 months (	) 6 months () 9 i	months () Full time () Other
Name	Age	Relationship
Anticipated Length of Stay: () 3 months (	)6 months ()9 n	nonths ()Full time ()Other
TE: Occupancy is limited to THREE (3) PE	SONS one of whe	m must be 55 years of age or older

NOTE: Occupancy is limited to THREE (3) PERSONS, one of whom must be 55 years of age or older and the other of whom must be 40 years of age of older. Holiday Park is "housing for older persons" within the meaning of the Fair Housing Amendments Act of 1988, U.S.C. Sections 3601, et seq. A proposed occupant who does not meet the foregoing criteria must be a bona fide caregiver, who must be separately approved by the Board of Trustees. See "Deed Restrictions", Article III, Sections 1,2,3,4,5 and 6.

Applicant's Initials\_\_\_\_\_Initials\_\_\_\_\_

## APPLICANT'S INFORMATION IN CASE OF EMERGENCY:

10 Contact Person in Case of Emergency: (Other than co-applicant)

Name:	Name:	
Relationship:	Relationship:	
Address:	Address:	
Telephone:	Telephone:	

11. Type(s) and Number of Motor Vehicles to be parked on Premises:\_\_\_\_

# NOTE: Commercial Vehicles, Recreational Vehicles, Boats, Trailers, Canoes, etc. CANNOT be Parked on the Premises.

12. Does Proposed Occupant Own (?):

Recreational Vehicle:	Yes No	If Yes, Type and Size:	
Boat: Yes No	_ If Yes, Size:		
Cargo/Utility Trailer: _	Yes No	If Yes, Size:	

NOTE: There are rules and regulations regarding the keeping of vehicles (other than passenger vehicles). Arrangements for off-premises storage may be required. Space in the vehicle compound is limited to one (1) space on a first come first serve basis. See Rules and Regulations – Storage Compound Rules.

### APPLICANT'S ACKNOWLEDGEMENT OF THE DISTRICT RESTRICTIONS

Before Applicant completes and signs this Application, Applicant is advised that Port Malabar Holiday Park Mobile Home Park Recreation District is a "Deed Restricted Community" pertaining to ownership and the use of property in Holiday Park. Accordingly, Applicant is hereby advised to obtain from the Seller or Real Estate Broker (if any) or that Applicant may receive from the Holiday Park District Office, a copy of the "Newcomer Packet" containing all current District rules, regulations and restrictions.

# THE UNDERSIGNED HEREBY ACKNOWLEDGES RECEIPT OF THE "NEWCOMER PACKET" AND HAS READ AND UNDERSTANDS THE CONTENTS OF THE DOCUMENTS IN THEIR ENTIRITY:

Signature of 1 <sup>st</sup> Applicant:	Date:
Signature of 2 <sup>nd</sup> Applicant:	_Date:

Applicant's Initials	Initials
Applicant s initials	initiais

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# **Under 55 Disclosure**

I / We understand Port Malabar Holiday Park Mobile Home Park Recreation District is a community intended and operated as "housing for older persons" within the meaning of the Fair Housing Amendment Act of 1988, U.S.C. Sections 3601, et seq.

I / We understand occupancy of a dwelling unit on a lot shall not be permitted unless at least one person in such dwelling unit shall be fifty-five (55) years of age or older; provided however, all other occupants (excluding "under age guests" as defined below) of the dwelling unit must be at least forty (40) years of age.

An "under age guest" of a lot owner or an authorized lot renter shall, without restriction due to age or familial status, be permitted to stay, with a resident, for a maximum of twenty-one (21) days or less per visit, two (2) times a year with a minimum of thirty (30) days between each visit within any twelve (12) month period.

## Reference: "Deed Restrictions", Article III, Sections 1,2,3,4,5 and 6.

By signing below, I agree to all of the conditions stated above:

Signature of 1<sup>st</sup> Applicant:\_\_\_\_\_

Date:\_\_\_\_

Signature of 2<sup>nd</sup> Applicant:\_\_\_\_\_

Date:

Applicant's Initials\_\_\_\_\_Initials\_\_\_\_\_

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# AGE VERIFICATION STATEMENT

As provided by Federal Law, Port Malabar Holiday Park Mobile Home Park Recreation District is a community intended to provide housing for older persons in accordance with the Housing for Older Persons Act. Part of that Act requires housing providers to verify the ages of residents who live in the community.

Name of 1 <sup>st</sup> Applicant:		
Name of 2 <sup>nd</sup> Applicant:		
Check the method of Age Verification Provided:		
1 <sup>st</sup> Applicant	2 <sup>nd</sup> Applicant	
Date of Birth	Date of Birth	
Driver's License		Driver's License
Passport		Passport
State Identification		_ State Identification
Birth Certificate		Birth Certificate
Signature of 1 <sup>st</sup> Applicant:		Date:
Signature of 2 <sup>nd</sup> Applicant:		Date:
Applicant's InitialsInitials		
Filename Renter-Non-owner Application		6

## **ACKNOWLEDGEMENT OF DEED RESTRICTIONS & OVER 55 COMMUNITY**

Applicant(s) is /are advised that certain restrictions, conditions, covenants and other provisions pertain to the ownership and use of property in the District. Accordingly, Applicant(s) must acknowledge receipt of District's Deed Restrictions, Rules and Regulations, Policies and By-Laws. These documents are made available for viewing at the District Office and <u>http://www.holidayparkfl.com/</u> at no charge and are included in the "Newcomer Packet".

As property owner, the undersigned hereby acknowledges that I/We shall be held responsible for compliance with all the restrictions, conditions, covenants and other provisions contained in them, including, but not limited to 1) restrictions concerning the use of such property, 2) restrictions concerning the ages of occupants, and 3) restrictions include the undersigned's family, guests and other licensees.

Application approval is conditioned upon the undersigned's agreement to abide by and comply with the above described restrictions, conditions, covenants and other provisions contained in the District documents as presently constituted and as the same may be hereafter amended from time to time.

Under penalty of perjury, the undersigned declares and affirms that the undersigned has examined the application and to the best of the undersigned's knowledge and belief, it is true and correct.

## I have received, read and understand the above documents pertaining to the District

Signature of Applicant:		Date:	
Signature of Co-Applicant:		Date:	
Witness's Signature:			
STATE OF			
COUNTY OF			
The foregoing Certificate was acknowledged before me this	day of	, 20	
Ву	, who		
(Notary choose one) ( ) is/are personally known to me, or (	) has produced		
Identification.			
	Signature of Notary F	Public	_
		ary Public, affix seal and stat n number and expiration date	

District Overview: Port Malabar Mobile Home Park Recreation District is a community intended and operated for persons over 55 years of age under the Federal Fair Housing act of 1988. It functions as a Special Taxing District according to Florida Statute 418. It is a subdivision of privately owned lots and homes, which are Deed Restricted. Regulations include, but are not limited to, size and number of pets, duration of stay of visitors and Architectural Controls. A non-ad valorem assessment is levied which is paid annually in addition to real estate taxes. The District is administered by a Board of Trustees, elected from Precinct 101, which is Holiday Park. The assessment covers employee wages, roads & drainage, ponds management, mowing operations, facilities and pool maintenance. Residents are provided basic cable, gate access 24 /7 and the choice to join HPPOA, the community's social and activities non-profit association. The elected officials of the District conduct business at Public Meeting and in accordance with government in the Sunshine. From time to time, they may elect to impose fees. When, in the course of conducting District business, the office finds itself performing duties rising from private or contractual changes in ownership, occupancy, rentals, leases or vacancies, a <u>\$50.00 fee is payable to Port Malabar</u> Holiday Park Mobile Home Park Recreation District is required.

# FOR USE BY THE DISTRICT OFFICE

REVIEWED APPLICATION FOR ACCURACY AND COMPLETENESS

Initials

Date

**Received Stamp** 

	New Owner has been notified	No Violations	
Violation Status Reviewed by District Manager	[]	[]	

## COMMENTS:

Reviewed by District Manager

# FOR USE BY THE BOARD OF TRUSTEES

### COMMENTS:

20/11	<b>BOARD ACTION:</b>	
Approved	Disapproved	
[]	[]	

Print Name

Note: The review by the Trustees must be performed within 24 hours of receipt of the application. Please return the Board Action page to the office. Disapprovals require an explanation in the comments section above.

# FOR USE BY THE BOARD OF TRUSTEES

COMMENTS:

REVIEWING TRUSTEE:		<b>BOARD ACTION:</b>	
		Approved	Disapproved
Signature	Date	_ []	[]

Print Name

Note: The review by the Trustees must be performed within 24 hours of receipt of the application. Please return the Board Action page to the office. Disapprovals require an explanation in the comments section above.