

***The Royale Riviera, A Condominium
c/o Elliott Merrill Community Management
835 20th Place, Vero Beach, FL 32960
Ph: (772) 569-9853; Fax: (772) 569-4300***

APPLICATION FOR LEASE OR PURCHASE

1. Application is hereby made of the (lease) (purchase) of the unit noted above (**leasing must be for a period of not less than three (3) months**).
2. It is understood that Royale Riviera, by Intent and Rule and Regulation, as recorded in and for Indian River County, is established as a housing for community for older persons - AGE 55 OR OLDER.
3. It is understood that if approved, I (we) have read and will abide by the Rules and Regulations of the Association as presently constituted, or may be amended.
4. It is understood that transfer by sale or lease must be submitted to and approved by the Board of Directors.
5. It is understood that children may be permitted to reside as a guest in a unit as follows:
 - a). Period **NOT** to exceed thirty (30) days per year.
 - b). Lessees for a period of less than twelve (12) months tenancy, may have children visit for a maximum of seven (7) days during the term of the lease.
6. It is understood that NO PETS are permitted.
7. This form must be completed by the prospective purchaser or lessee and then submitted by the owner, or his/her agent, along with:
 - a). Executed copy of the purchase or lease agreement
 - b). A **non-refundable** application fee of \$100.00 for Sales and \$75.00 for Leases, made payable to "The Royale Riviera Association."
 - c). A copy of the purchaser(s)/Lessee(s) Driver's License.

This information and fee must be submitted to the Royale Riviera Condominium Association Board of Directors at least thirty (30) days prior to the effective date of the lease or sale.

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APPLICATION FOR LEASE OR PURCHASE

Please answer all questions completely:

Application to: Buy OR Lease Unit #: _____

If Sale, present owner: _____

If Lease, Term of Lease: From _____, 20____ TO _____, 20____

Name of Applicant: _____ Age: _____

Spouse Name (or other occupant): _____ Age: _____

Present Address: _____

Telephone Numbers: Home: _____ Cell: _____

Email Address(es): _____

Occupation (or former if retired): _____

Employer Address: _____

Employer Telephone Number: _____

Bank References

1. Name of Bank: _____ Telephone Number: _____

Address of Bank: _____

2. Name of Bank: _____ Telephone Number: _____

Address of Bank: _____

Character References

1. Name: _____ Telephone Number: _____

Address: _____

2. Name: _____ Telephone Number: _____

Address: _____

I/WE THE APPLICANT(S) STATE THAT I/WE HAVE COMPLETELY READ AND UNDERSTAND THE RULES AND REGULATIONS OF THE ROYALE RIVIERA CONDOMINIUM ASSOCIATION AND THAT I/WE WILL ABIDE BY THESE RULES AND REGULATIONS IN THEIR ENTIRETY IF THIS APPLICATION IS ACCEPTED.

SIGNATURE OF APPLICANT: _____ DATE: _____

(I attest that at least one person in the unit is 55 years of age or older)

SIGNATURE OF SPOUSE: _____ DATE: _____

Application Approved: _____ Date: _____

(Association President)

Application Denied _____ Date: _____

(Association President)

Reason for Denial:

