TIARA TOWERS CONDOMINIUM ASSOCIATION

C/o ELLIOTT MERRILL COMMUNITY MANAGEMENT
835 20th PLACE
VERO BEACH, FL 32960
Office 772-466-2630 | Fax 772-569-4300

SALE APPLICATION

Unit # _____ Current Unit Owner(s): _____

Garage # _____ Garageport Code # _____

Attach **$150.00** application and criminal background check fee with this sale application payable to: Tiara Towers Condominium Association along with a **fully executed copy of the purchase agreement**.

All sale applications must be on this form and must be signed by the buyer and seller. The Board may take up to thirty (30) days to approve or disapprove a sale application, so the application must arrive in the Office at least thirty (30) days in advance of the proposed closing. No prospective owner may move in before all steps of the approval process have been completed.

The sale of all Tiara units will be conditioned on the positive inspection of the shutters of those units by a qualified shutter contractor. The cost of the inspection and necessary repairs to be worked out between the buyer and seller before the sale is approved.

I (we) the undersigned furnish the following information for use of the Board of Directors of the Tiara Towers Condominium Association, Inc. authorizing it to contact any or all references. I acknowledge reading and receipt of this note and further acknowledge through my signature(s) that a negative criminal check will void this application and the sale.

Applicant's Name(s): _____

Address: _____

Phone #: _____ Email: _____

Previous Address(s) if at present address less than two years:

_____

Number in Party _____ Number of Adults _____ Number of Children _____

Children and their ages: _____

Others who will be in residence: _____

Business/Occupation of each applicant: _____ _____

Employer: _____ _____

Address: _____ _____

Phone: _____ _____

At least personal or social references:

Name(s)	Street	City	State	Zip	Phone
Name(s)	Street	City	State	Zip	Phone

Has the applicant rented at Tiara before? _____ If so, which unit _____ and when _____

Rented thought whom: _____

Applicant's Bank Reference, (name, address, telephones)

_____

Applicant(s) automobile(s) to be parked on premises: (Boats, campers, motor homes, vehicles bearing commercial lettering or insignia, trailers, commercial vans, motorcycles, mopeds and RV are prohibited UNLESS stored inside a GARAGE, (**not a garage-port**), and the Garage Door is fully closed).

Car 1: Make _____ Yr. _____ Model _____ Color _____ Tag# _____ State ____

Car 2: Make _____ Yr. _____ Model _____ Color _____ Tag# _____ State ____

All vehicles must be registered with the Tiara Towers Condominium Association and must display a decal or permit on rear window on the driver's side, which will be furnished by the condo association. Applicant(s) hereby grants Tiara the right to remove any vehicle owned or used by any owner, which does not have proper decal or permit, or which is not acceptable vehicle as defined by the Rules & Regulations. The owner will pay all costs of removal, storage and any legal fees or costs incurred by Tiara.

The Tiara Electrical Grid has been determined to have limited excess capacity. No Electric Vehicle owner may connect an EV charger to any Tiara power receptacle without prior written approval. A separate Tiara Policy and Procedures for Dedicated EV Charging and Application is available on the Tiara website and must be completed by those owners wanting to charge their vehicles.

ONLY ONE DOG OR CAT, NOT TO EXCEED 20LBS. PER OWNER IS ALLOWED. No renter or guest shall be allowed pets at Tiara Towers. Please attach Tiara Towers Pet Registration Form along with current documentation related to current rabies vaccinations and a picture of the pet.

Pet Information: to be completed by purchaser(s).

_____	_____	_____
Type of Pet	Breed	Weight of Pet

1. We understand that approval of this Application is entirely discretionary with the Board of Directors of the Association, and the Board's decision is final.

2. The owner(s) and applicant(s) understand and agree that the only person or persons that may occupy the unit are those persons whose names appear hereon as applicant and members of the applicant's family, and that violation of this covenant shall grant to the Association the right to have all persons residing in said unit immediately evicted.

The owner(s) as well as the applicant(s) shall be responsible for all costs and expensed, including court costs and attorney's fees incurred by the Association in enforcing this covenant, this being a condition to the approval of the application.

3. I (we) have received a copy of the Rules & Regulations of the Association and I (we) hereby agree in all respects to abide by said Rules & Regulations.

4. I (we), as purchasers, have received a copy of the Condominium Documents and Amendments thereto and I (we) hereby agree in all respect to abide by said Condominium Documents. I (we) the undersigned acknowledge hereto by signing below; and to the best of my (our) knowledge, the information given on this application is true and correct.

5. I (we) acknowledge reading and receipt of this note and further acknowledge through my signature(s) that a negative criminal check or credit check will void this application and the sale.

_____ _____

Applicant Signature Co-application Signature

_____ _____

Date Date

Owner: I (we) the undersigned owner of said unit to be sold acknowledge all facts on this application for approval by signing below:

Owner's Signature: _____ Date: _____

Agent's name, title, company, address & phone: _____

_____

Approximate closing date must be included with the specific instructions for sending approval and statement concerning assessments to:

Complete One: Owner _____

Or

Title Company _____

Or

Attorney _____

Address to send Certificate of Approval: _____

Closing Date: _____

Applicant(s) Signature _____

Owner(s) Signature _____

Key to Unit, P.O. Box supplied by: _____

Copy of "Rules & Regulations" Attached

Tiara Towers Condominium Association
c/o Elliott Merrill Community Management

BACKGROUND CHECK CONSENT FORM

1. Applicant's Name (please print): _____ Date of Birth: _____

   S.S. # _____ DL # _____ State _____

   Current Address: _____ City _____ State _____ Zip _____

2. Co-Applicant's Name (please print): _____ Date of Birth: _____

   S.S. # _____ DL # _____ State _____

   Current Address: _____ City _____ State _____ Zip _____

Note: Convictions of misdemeanors or felony crimes DO NOT automatically drop off your records after a specified period of time. The court must be petitioned in order to have any conviction of a crime removed.

1. Have you **EVER** been convicted as a sex related crime?	[ ] Yes	[ ] No
2. If yes, did the crime involve force or minors?	[ ] Yes	[ ] No
3. Have you **EVER** been convicted of a crime involving violence or threat of violence?	[ ] Yes	[ ] No
4. Have you **EVER** been convicted of criminal activity in drugs or alcoholic beverages resulting in a felony?	[ ] Yes	[ ] No
5. Have you **EVER** been convicted of any other crime except a Minor traffic violation? (Includes traffic crimes)	[ ] Yes	[ ] No
6. Have you been arrested within the last three years for which There has not yet been an acquittal or dismissal?	[ ] Yes	[ ] No

I hereby authorize Tiara Towers Condominium Association to check civil or criminal records and driving records, etc. to verify any statement on this form. I hereby release all people, companied or corporations furnishing such information from liability and responsibility. I agree that a photographic copy or a telephonic facsimile of this document shall be valid for all purposed.

I acknowledge reading and receipt of this note and further acknowledge through my signature(s) that a negative criminal check will void this application and the sale.

_____ _____
Applicant's Signature Date

_____ _____
Co-Applicant's Signature Date

PLEASE SUBMIT COMPLETE APPLICATION TO:
Tiara Towers Condominium c/o Elliott Merrill Community Management
835 20th Place, Vero Beach FL 32960

Tiara Towers Condominium Association, Inc.

C/O ELLIOTT MERRILL COMMUNITY MANAGEMENT
835 20TH PLACE | VERO BEACH, FL 32960
Office 772-466-2630 | Fax 772-569-4300
www.elliottmerrill.com

ELECTRONIC COMMUNICATION CONSENT FORM

Pursuant to the Florida Condominium Act and relevant governing documents, community associations may provide official notices and permitted communications to unit/lot owners via electronic transmission (email), provided written consent is received from the owner(s).

By completing and signing this form, you authorize Tiara Towers Condominium Association and Elliott Merrill Community Management to send official notices and communications electronically to the email address(es) you provide below.

Physical postings of meeting notices are still required on community property, even with owner consent to electronic delivery.

OWNER INFORMATION (Please Print Clearly)

Owner's Full Name (Designated Voting Member): _____

Property Address & Unit # : _____

Email Address(es): _____

_____

CONSENT & ACKNOWLEDGMENT

I/We hereby consent to receive all required and permitted Association notices and communications via electronic transmission at the above email address(es). I/We agree to notify the Association immediately of any changes to the email address(es) provided.

Furthermore, I/We authorize the Association to send electronic notices to any additional co-owners of this unit/lot as indicated below.

Signature of Designated Voting Owner: _____ Date: _____

ADDITIONAL CO-OWNER INFORMATION (if applicable)

	Co-Owner's Name	Email Address
1.	_____	_____
2.	_____	_____

Return Completed Form To:

Elliott Merrill Community Management
Attn: Paola Alvarado
835 20th Place, Vero Beach, FL 32960
Email: PaolaA@elliottmerrill.com or Fax: 772-569-4300

Tiara Towers Condominium Association

C/O Elliott Merrill Community Management
835 20th Place
Vero Beach, FL 32960
Ph. (772) 466-2630 | Fax. (772) 569-4300
www.ElliottMerrill.com

Electronic Voting Authorization Form

By providing the information below, I hereby consent to receive notices and cast all votes relating to the association, electronically in conformance with the Florida Statutes and resolution of the Board of Directors dated 10/08/26.

OWNER INFORMATION

Name(s): _____

Email: _____

(**ONLY ONE EMAIL ADDRESS PER UNIT PREFERABLE FROM THE VOTING REPRESENTATIVE OF THE UNIT**)

Tiara Towers Address:_____ Unit # _____

Telephone(s) Home: _____ Cell: _____

Current Mailing Address (If different from above)

Mailing Address: _____

Telephone(s) Home: _____ Cell: _____

By providing this information, I hereby grant permission to the association to contact me at any of the methods listed. This permission is limited to association business and electronic voting on all matters.

Signature of Designated Owner: _____ Date: _____

You will receive all meeting notices related to the voting process by email and said notices will also be posted on the community property. You will be required to also register with the independent electronic voting contractor chosen by the board. The association will provide the information provided above to the contractor administering to the vote and you will receive an email from them to register at the proper time.

Thank you for choosing this easy and convenient way of voting on association matters. Your electronic vote will also count as your proxy, so once your vote is cast, there is no need to send any other material to the association.

We ask that you please fill out the consent form and send it by mail to the address below, email it to paolaa@elliottmerrill.com or fax it to 772-569-4300.