

2026 APPLICATION FOR CONSENT TO PURCHASE OR LEASE

This application form **must** be completed by the prospective Buyer(s)/Tenant(s).

IT MUST INCLUDE: Completion of this Application; An “original” local Police Record for each adult applicant (anyone over the age of 18 that will reside in the community); A copy of the proposed sale/lease contract; A photocopy of a valid & unexpired government picture ID (driver’s license, passport, residence card, etc.); A photocopy of valid & unexpired auto registration; three (3) letters of recommendation for each applicant (over the age of 18) which should consist of 1 personal, 1 business and 1 bank reference; And an initialed acceptance of the Association’s Rules & Regulations.

All the above mentioned forms must be submitted to Guernica Condominium Association, Inc., c/o Maria Del Busto (Administrator), at GuernicaCondoAssoc@gmail.com no less than fifteen days prior to the date of action (sale and/or move in) which is desired of the Association. The original documents must be kept and delivered to the Association once the application process has been approved and the Certificate of Approval has been signed by all Applicants.

IMPORTANT NOTE: **Missing or incomplete information will be cause for the application to be returned without further action.**

Fees: (non-refundable)

- **Application fee:** \$125.00 per person (except husband/wife or parent/dependent child.) for anyone over the age of 18 who will live in the community
- **Make Check payable to:** Guernica Condo Association Inc.
- **Address Where to Mail Fee:** P.O. Box 960362, Miami, Florida 33296
(Or it may be deposited at Association’s box office in the Community but must first inform the Administrator of this action)

Important Restrictions to Understand:

- New Residents must be approved in writing with an Approval Certificate from the Association, with at least (15) days in advanced notice to move in or out, so that the Association can make the proper arrangements.
- Residents are permitted to move into the Building between the hours of 8:00am and 6:00pm, Monday through Friday AND 8:00am - 1:00am on Saturdays and Sunday. All maintenance & other association fees must be current at time of application.
- **No boxes may be deposited in the dumpster. No dumping of furniture is allowed on the premises. Fines will be imposed.**
- If this is for a purchase, the Buyer agrees to provide the Association with a copy of the Closing Statement no later than (7) seven days after closing date.
- **NOTE: TENANTS ARE NOT ALLOWED TO HAVE ANY PETS!**

I certify that I have read & understand the above application requirements and restrictions. **Unit#** _____ **Date:** _____

Applicant Name: _____ **Owner Name:** _____

Applicant Signature: _____ **Owner Signature:** _____

Application for Consent to Purchase or Lease

- * This application for occupancy and release form must be completed in detail by the proposed Buyer(s) /Tenant(s).
- * Please attach a copy of the Sales Contract or Lease Agreement to this application.
- * The Seller (current owner) shall provide the Buyer with of all the Condominium documents.
- * Processing of this application will begin after all required fees & forms have been completed, signed, and received by the Association.

Date: _____ Unit Number: _____ Approximate Closing/Lease Date: _____

Unit Owner's Name: _____

Telephone: _____ Cell: _____

Owner's Address: _____

Owner's Email: _____

Name and Telephone of Realtor: _____

BUYER / TENANT INFORMATION

NAME: of Proposed *Buyer(s)* (as they will appear on Title) OR ***Tenant(s)***.

a) _____ b) _____

Complete the below Information for ALL other individuals that will live in the unit.

NAME APPLICANT	AGE	RELATIONSHIP TO

1. I represent to the Board of Directors that the purpose for this application is to:
PURCHASE_____ **OR** **LEASE**_____
2. I hereby agree for myself and on behalf of all persons who may use the unit which seek to purchase/lease that we will abide by all the restrictions contained in the By-Laws, Rules and Regulations, Condominium Documents and restrictions which are or may in the future be imposed by the Board of Directors of Guernica Condominium Association, Inc.
3. I understand that I will be present when guests, relatives or children who are not residents that occupy the unit.
4. I have _____ have not _____ received from the current owner a copy of all the Condominium Documents and Rules and Regulations.
5. I understand that the acceptance for purchase/lease of any units is conditioned upon the truth and accuracy of this application and upon the approval of the Board of Directors. Occupancy prior to final approval is **PROHIBITED**.
6. ***I understand that the Board of Directors of Guernica Condominium Assoc. hereinafter referred to as: the "Community Association" will conduct an investigation of my background and any other investigation as the Board of Directors may deem necessary. I specifically authorize the Board of Directors or their Agents to make such an investigation and agree that the information contained in this application may be used in such investigation, and the Board of Directors and Officers of the Community Association itself shall be held harmless from any action or claim in connection with the use of the information contained herein or any investigation conducted by the Board or its Agent/Administrator or representatives.***
7. I understand that prospective Buyers or Tenants may be required to go through a personal interview with the Board of Directors and/or its Agent/Administrator.

In making the foregoing application, I am aware that the decision of the Board of Directors will be final and no reason will be given for any action taken by the Board of Directors.

I agree to be governed by the determination of the Board of Directors

Signature of Applicant

Date

Signature of Co-Applicant

Date

APPLICANT(S) PERSONAL INFORMATION

APPLICANT NAME: _____

CO-APPLICANT NAME: _____

Present Address (NOT the address you are moving to):

(Street) (City) (State) (Zip Code)

(Home/Office Telephone) (Cell Number) (Email)

Applicant's Information

Social Security # of Applicant

Date of Birth of Applicant

Place of Birth of Applicant

Driver's License # of Applicant

State the Driver's License was Issued
(Applicant)

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Cellular & Email Address

Co-Applicant's Information

Social Security # of Co-Applicant

Date of Birth of Co-Applicant

Place of Birth of Co-Applicant

Driver's License # of Co-Applicant

State the Driver's License was
Issued (Co-Applicant)

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Cellular & Email Address

Any Children: _____
(How many & their ages)

Total number of People which will reside in the unit: _____

Is Co-Applicant a Spouse? If not, specify the relationship: _____

In case of Emergency, notify: _____ Cell: _____

Vehicle 1, type/year and color: _____

Tag Number: _____

Vehicle 2, type/year and color: _____

Tag Number: _____

NOTE: Parking Decals are assigned by the Association and they will be determined based on unit size and availability

NAME & CONTACT CELL NUMBER OF A CLOSE RELATIVE:

**PRESENT LANDLORD/MORTGAGE COMPANY
(NOT for the address you are moving to)**

(Name)	(Address)	(Telephone/Cell Number)
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EMPLOYMENT INFORMATION

(Applicant's Employer)	(Employer's Address)
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(Position)	(Date of Employment)	(Employer's telephone)
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(Co-Applicant's Employer)	(Employer's Address)
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(Position)	(Date of Employment)	(Employer's telephone)
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**CHARACTER REFERENCES
OTHER THAN RELATIVES**

(Name)	(Relationship)	(Contact Telephone)
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(Name)	(Relationship)	(Contact Telephone)
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(Name)	(Relationship)	(Contact Telephone)
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Have you (applicant and co-applicant) ever been evicted? _____

Have you (applicant and co-applicant) ever been convicted of a crime? _____

If yes, what was the crime, when and what was the conviction: _____

I/WE CERTIFY that all the information that I/WE have provided in this application is correct to the best of my/our knowledge.

I/WE UNDERSTAND that ANY falsification or omission of information may disqualify me/us from approval of this application and occupancy in the Community.

I/WE hereby AUTHORIZE Guernica Condominium Association, Inc. and its designated Agent/Administrator and representatives to conduct a comprehensive review of my background using various consumer generated reports. This action may result in a report of my character; reputation; personal characteristic; credit; criminal; and eviction history. This includes searching any state's sex offender ("Meagan's Law") database for my/our name(s).

I/WE further AUTHORIZE any individual; company; firm; or public agencies (including but not limited to - Social Security Administration and Law Enforcement) to divulge any and all information, verbal or written, pertaining to me/us to Guernica Condominium Association, Inc. and its designated Agent/Administrator and representatives. I further authorize the complete release of any reports or data pertaining to me/us which the individual; company; firm; corporation; or public agency may have, to include information or data received from other sources.

I/WE hereby RELEASE Guernica Condominium Association, Inc. and its designated agent/administrator and representatives from ANY and ALL liability for damages of whatever kind, which may, at any time, result to me; my heirs; family; or associates because of compliance with this authorization and request to release.

Name of Applicant

Name of Co-Applicant

Signature of Applicant

Signature of Co-Applicant

Date

Date

Application for: Guernica Condominium Assoc.

Unit #: _____