



Garrett's Run

Condo Association



7900 GREENSBORO DR., WEST MELBOURNE, FL 32904

c/o Reconcilable Differences, Inc

2560 Palm Lake Drive, Merritt Island, FL 32952

Phone: 321-453-1585 Fax: 321-305-6199 Lynn Cell: 321-960-9334

Office@RecDif.com

www.ReconcilableDifferences.net

NEW UNIT OWNER APPLICATION FOR U.S. CITIZENS

In Garrett's Run Condo Association

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH YOUR APPLICATION:

1. Completed **ACCUDATA SCREENING AUTHORIZATION FORM** for each applicant (each name on the property Deed)
2. Completed **NEW UNIT OWNER APPLICATION**
3. **COLOR COPY OF DRIVER'S LICENSE** OR IDENTIFICATION CARD FOR EACH PERSON IN THE UNIT.
4. **PROOF OF PURCHASE** (Signed Sales Contract or Special Warranty Deed)
5. **VETERINARIAN'S STATEMENT** if applicable. This must show the pet's name, weight, and current vaccination shots. Two pet's per household, no pets over 30 pounds at maturity.
6. **VERIFICATION OF INCOME:** from current employer or retirement income. Acceptable types of proof of income: Paystubs, annual Social Security statement, bank statements, etc.
7. **CREDIT AND BACKGROUND REPORT FEE: \$50.00 Per Person for US Citizens.** Payment can be made online at www.reconcilabledifferences.net. Click on "Pay Online", register for an account, pay with a credit card or an Electronic Check (Fees do apply) You can also mail your check or money order to the address above, please note which unit you are applying for in the memo of your check.

Upon completion of this application, please mail, email, fax, or bring to the Association Office at Garrett's Run and we will schedule an interview (Meet and Greet) with our manager.

NOTE: If you neglect to include payment or receipt of online payment for the background/credit report, we will be unable to process your application.

PLEASE NOTE THAT INTERVIEWS (MEET AND GREET) ARE ONLY DONE ON WEDNESDAY'S WITH A SCHEDULED TIME FROM 10 AM TO 3 PM. PLEASE CONTACT LYNN AT 321-960-9334 TO SCHEDULE THIS.

For Office USE: Date Received: _____ by _____

Interview Scheduled for: _____ at _____.

NEW OWNER PROFILE

Your cooperation in completing this profile thoroughly and promptly will be greatly appreciated. Please return the completed profile to management as soon as possible. Fax to 321-305-6199 or mail to 2560 Palm Lake Drive, Merritt Island, FL 32952 or Email to Office@RecDif.com.

1. **NAME (S) of OWNERS:** _____

1. BLDG # _____ UNIT # _____ Designated Voter: _____

2. Address for Receiving Mail: _____

City: _____ State: _____ Zip: _____

3. Telephone Numbers:

Condo (321) _____ Other Residence: (____) _____

Cell #: (____) _____ Cell #: (____) _____

Work #: _____ Company Name: _____

6. E-Mail Address: _____ Check if "None"

7. Please check one of the following:

Full Time Resident _____ Part Time Resident _____

8. Emergency Contact: _____ Phone: _____ Relation: _____

9. **Please attach a copy of the "Special Warranty Deed" received at Closing. PLEASE make sure you contact Manager to meet with her to receive parking decals otherwise vehicles will be towed at owner's expense.**

10. PETS: Two (2) are permitted in each unit, not to exceed 30 pounds at maturity. Leash laws and clean-up are enforced.

Type: _____ Name: _____ Weight: _____

Type: _____ Name: _____ Weight: _____

11. VEHICLE / BOAT REGISTRATION: (Include a valid registration for any vehicle or Boat/trailer)

Year	Make	Model	Color	Tag#	State
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

12. **FAMILY MEMBERS/GUESTS:** Those who may occupy your unit while you are away:

Last Name: _____ **First Name (s):** _____ **Relationship:** _____ **Other Info:** _____

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Date form filled out: _____

Reconcilable Differences Management Company
2560 Palm Lake Dr. Merritt Island, FL 32952
Phone: 321-453-1585 Fax: 321-305-6199

office@recdif.com www.ReconcilableDifferences.net



GARRETT'S RUN - US CITIZEN
OWNER SCREENING AUTHORIZATION FORM

Each applicant MUST fill out a separate release

(Please Print)

FULL Name: _____ Sex: _____

Address: _____

City, State,
Zip: _____

Social Security Number: _____ Date of Birth: ____/____/____

Driver's License # _____ State Issued: _____

Phone # _____ Cell or Home (circle one)

Employer Company: _____ Phone: _____ Years with Company: _____

Job Title: _____ Supervisor Name: _____

Have you ever been evicted from a tenancy or left owing money? YES _____ NO _____

Have you ever willfully or intentionally refused to pay rent when due? YES _____ NO _____

Have you ever been in litigation with a landlord? YES _____ NO _____

Have you ever had adjudication withheld or been convicted of a crime? YES _____ NO _____

Have you ever filed bankruptcy? YES _____ NO _____

If you have answered yes to any question above, please provide details on back of this page.
Type of Offense, Year it Happened, County and State where it happened, and end result.

ADDRESS of UNIT BEING PURCHASED: _____ Unit #: _____

I give my authorization to this landlord, AccuData Inc, or any party or agency contacted by this landlord to obtain and verify the above information, concerning a credit report, criminal records, motor vehicle and other history. I understand that inquiries may be made to various federal and state agencies, employers, and references.

Applicant's
Signature _____ Date _____

AccuData Screening Requested:

Package: 1 (2) 3 4 (please circle one)
Other Services: A B C D E F G H I J

Phone: (954) 755-8379 Fax: (800) 521-1905 E Mail: AccuDataInc@Bellsouth.net