



**BENCHMARK PROPERTY MANAGEMENT, INC.**

7932 Wiles Road · Coral Springs, Florida 33067 · Tel. (954) 344-5353 · Fax (954) 344-5399 · www.benchmarkpm.com

**URGENT**

If your application is incomplete, it will be returned to you by mail along with any fee you may have submitted, and a list of the missing items.

You may then complete the application and re-submit it together with the required fee.

Please provide the name and address which you would like us to use if the application is incomplete and must be returned to you.

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No. : \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

If you do not fill in the information above, we will use the best address available on the application which you submitted.

*Thornhill Lake Homeowners Association, Inc.*

**THORNHILL LAKE HOMEOWNERS ASSOCIATION, INC.**

**c/o Benchmark Property Management, Inc.**

7932 Wiles Road

Coral Springs, Florida 33067

(954) 344-5353 Fax (954) 344-5399

Dear Applicant,

**Please complete and submit the enclosed application together with a Non-refundable fee of \$100.00 per married couple OR \$100.00 per person over 18 years of age. The fee must be in the form of a money order or bank check made payable to Benchmark Property Management (cash and personal checks will not be accepted). All paperwork MUST be COMPLETED IN FULL. Incomplete paperwork will result in delaying the application process or immediate denial.**

In addition to the application, the Association requires the following information to be provided by the applicant:

- 1. Copy of all occupants' driver's licenses and vehicle registration.**
- 2. A recent photograph of all pets that will live in the unit.**
- 3. A legible copy of the lease.**
- 4. Married couples that do not share the same last name must provide proof of marriage NO exceptions.**
- 5. There is a mandatory \$ 1000.00 Security deposit required for all renters, made payable to Thornhill Lake. The deposit must be posted by the owner and submitted with the application.**

**PLEASE NOTE THERE IS A MINIMUM CREDIT SCORE OF 720 REQUIRED.**

The application process takes approximately 3 to 4 weeks. However, failure to submit the necessary documents will result in a delay in your application process.

The application may be mailed or hand-delivered to:

Benchmark Property Management, Inc.

7932 Wiles Road

Coral Springs, Florida 33067

Attention: Heather Bramos

We thank you for your cooperation and look forward to meeting with you.

Board of Directors

# THORNHILL LAKE HOMEOWNERS ASSOCIATION, INC.

Benchmark Property Management, Inc.

**CHECK ONE (of 4, @ right) OPTIONS ONLY**

Transaction Type Check One ) <sup>c</sup> (	<b>APPLICATION TO</b>			
	RENT ( )	PURCHASE ( )	RENT RENEWAL ( )	TITLE TRANSFER ( )

NAME OF APPLICANT: \_\_\_\_\_ SS#: \_\_\_\_\_ AGE \_\_\_\_\_

SPOUSE'S NAME: \_\_\_\_\_ SS#: \_\_\_\_\_ AGE \_\_\_\_\_

APPLICANT'S ADDRESS: \_\_\_\_\_ PH.: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

*PLEASE*

*CHECK* \_\_\_\_\_ RENTAL APPLICATION - RENTAL PERIOD FROM \_\_\_\_\_ TO \_\_\_\_\_

*ONE ONLY* \_\_\_\_\_ RESALE APPLICATION - DESIRED CLOSING DATE \_\_\_\_\_

**PLEASE LIST ALL OCCUPANT(S) WHO WILL RESIDE AT THE RESIDENCE, IF APPROVED:**

<u>NAME</u>	<u>RELATIONSHIP TO APPLICANT</u>	<u>DATE OF BIRTH</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**\*\*Leave Employer Information BLANK if retired and write RETIRED in the field directly below instead**

NAME OF EMPLOYER, ADDRESS AND PHONE: \_\_\_\_\_

**IN THE CASE OF AN EMERGENCY, PLEASE NOTIFY:**

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ PHONE # \_\_\_\_\_

NAME OF ATTORNEY, REALTOR OR TITLE COMPANY: (CIRCLE ONE): \_\_\_\_\_ **\*\*CHECK ONE**

ADDRESS: \_\_\_\_\_ LOCAL PHONE # \_\_\_\_\_

**SOCIAL REFERENCES:** (List 3 with complete addresses and phone #s) – NO FAMILY MEMBERS PLEASE!

- |           |     |       |
|-----------|-----|-------|
| (1) _____ | ( ) | _____ |
| (2) _____ | ( ) | _____ |
| (3) _____ | ( ) | _____ |

**BANK REFERENCES:** (List 2 with complete addresses and account numbers).

- |           |         |       |
|-----------|---------|-------|
| (1) _____ | ACCT.#: | _____ |
| (2) _____ | ACCT.#: | _____ |

**VEHICLE INFORMATION:** (List all vehicles you intend to park on the property.)

- |                 |              |                        |
|-----------------|--------------|------------------------|
| (1) MAKE: _____ | MODEL: _____ | LICENSE PLATE #: _____ |
| (2) MAKE: _____ | MODEL: _____ | LICENSE PLATE #: _____ |
| (3) MAKE: _____ | MODEL: _____ | LICENSE PLATE #: _____ |

**\$100.00 APPLICATION FEE AND COPY OF THE LEASE AND/OR CONTRACT OF SALE MUST ACCOMPANY APPLICATION BEFORE THE PROCESSING CAN BEGIN.**

**Please pay particular attention to the following: SUBLEASING IS NOT ALLOWED. LEASE RENEWALS MUST RECEIVE BOARD OF DIRECTORS APPROVAL OR TENANT MAY BE SUBJECT TO EVICTION.**

- a) I/We hereby authorize Thornhill Lake Homeowners Association, Inc. and/or their attorney or representative, any and all information they request concerning my banking, credit, residence, employment and background in reference with or to my/our application made for residence.
- b) I/We have completed this application truthfully and accurately. I am aware that if any information on this application is found to be untrue that it may result in application to the Association being disapproved.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

# BENCHMARK PROPERTY MANAGEMENT, INC.

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## **Authorization to Perform Background Check**

I hereby authorize Benchmark Property Management, Inc., as agent for Thornhill Lake Homeowners Association (herein the "Association"), to obtain a consumer report, and any other information deemed necessary by the Association, for the purpose of the Association evaluating my application. I understand that such information may include, but is not limited to, my credit history, civil and criminal information, records of arrest, rental history, employment/salary details, vehicle records, licensing records, banking information and/or any other necessary information. I understand that subsequent consumer reports may be obtained and utilized under this authorization in connection with an update, renewal, extension or collection with respect to or in connection with the rental, lease or purchase of a residence for which this application was made. I hereby expressly release Benchmark Property Management, Inc. and any procurer or furnisher of information, from any liability what-so-ever in the use, procurement, or furnishing of such information, and understand that my application information, including Social Security Number, shall remain confidential except through court order or subpoena as provided under relevant law.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**PET REGISTRATION FORM**

OWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER (      ) \_\_\_\_\_

**MAXIMUM TWO PETS PER HOUSEHOLD PERMITTED.**

BREED OF PET: \_\_\_\_\_

APPROXIMATE WEIGHT OF PET AT FULL GROWTH: \_\_\_\_\_

PET'S NAME: \_\_\_\_\_

PET'S COLORING: \_\_\_\_\_

**PLEASE INCLUDE PHOTO OF PET FOR IDENTIFICATION PURPOSES**

I DO NOT OWN A PET \_\_\_\_\_

Please remember all dogs are to be walked on a leash. Person walking dog is responsible for the picking up the dog's excretion.

By my signature below, I verify that I have read and understand the above and will abide by the Rules and Regulations of [Thornhill Lake Homeowners Association, Inc.](#) in this regard.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

FORMS MUST BE SIGNED WHETHER YOU HAVE A PET OR NOT

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**PROOF OF RECEIPT OF DOCUMENTS**  
*(For Sales Only)*

I / We have received the Declaration of Covenants, The Articles of Incorporation, the By-Laws and the Rules and Regulations for THORNHILL LAKE HOMEOWNERS ASSOCIATION, INC. and agree to abide by them.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**PROOF OF RECEIPT OF RULES & REGULATIONS**  
*(For Leases Only)*

I / We have received the RULES & REGULATIONS for THORNHILL LAKE HOMEOWNERS ASSOCIATION, INC. and agree to abide by them.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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**CERTIFICATE OF APPROVAL FOR LEASE**

THIS IS TO CERTIFY THAT \_\_\_\_\_

HAS / HAVE BEEN APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_

**SELECT ONE**

BY THE THORNHILL LAKE HOMEOWNERS ASSOCIATION AS

THE LESSEE(S) OF THE FOLLOWING DESCRIBED PROPERTY LOCATED IN  
THORNHILL LAKE HOMEOWNERS ASSOCIATION.

(Address) \_\_\_\_\_

This agreement applies only to the lease for the above home from

\_\_\_\_\_ to \_\_\_\_\_

DATED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_.

SIGNATURE \_\_\_\_\_

On behalf of Association -