

Triton Property Management
900 E. Indiantown Road, Suite 210
Jupiter, FL 33477
561-250-6565
residentservices@tritoncam.com

VALENCIA AREA CONDOMINIUM ASSOCIATION **ADDITIONAL OCCUPANT APPLICATION**

This package must be submitted to Triton Property Management FULLY COMPLETED & SIGNED in all required areas. All documents must be in order as requested on the below checklist. If ANY information is incorrect, incomplete, or out of order it will be returned.

INFORMATION REGARDING THE SCREENING PACKAGE

- Triton Property Management will only provide updates of application status to the Applicant(s).
- **A Screening package is considered complete when all information is properly filled out and listed requirements have been provided to the management company. Incomplete packages will not be accepted.**
- **\$100.00 Background Screening Fee (non-refundable) per applicant (unless married or dependent) made payable to Triton Property Management**
- The Approval process may take up to **thirty (30) days.**

INDIVIDUAL COMMUNITY REQUIREMENT CHECK LIST

1. Clear photo-copy of valid State ID, Driver's License, or Passport must be provided.
2. Copy of Current Vehicle Registration and Proof of Insurance must be provided.
3. Vesta Form signed by applicant and owner.
4. A letter of occupancy authorizing occupant is required from owner of unit for person(s) if no lease is generated for residency.
5. Occupancy is limited to two (2) individuals for both one (1) bedroom units and three (3) individuals for two (2) bedroom units.
6. At least one (1) person, fifty-five (55) year of age or older must be a permanent occupant of each unit while any person is in occupancy of a unit.
7. No pets allowed other than Service Animals. ESA documentation and annual renewal of information must be presented to the property manager

Updated 11/7/24

Valencia Condominium Association

APPLICATION FOR OCCUPANCY

(PLEASE PRINT CLEARLY)

(VALENCIA) PROPERTY ADDRESS: _____

CURRENT OWNER NAME(S): _____

CURRENT OWNER PHONE NUMBER: _____ EMAIL: _____

CURRENT OWNER MAILING ADDRESS: _____

APPLICANT: _____ **DATE OF BIRTH:** _____ **SS#:** _____

PHONE NUMBER: _____ EMAIL: _____

() Single () Married () Separated () Divorced MAIDEN NAME: _____

CO-APPLICANT: _____ **DATE OF BIRTH:** _____ **SS#:** _____

PHONE NUMBER: _____ EMAIL: _____

() Single () Married () Separated () Divorced MAIDEN NAME: _____

PLEASE STATE THE NAMES AND RELATIONSHIP OF ALL WHO WILL BE OCCUPYING THE UNIT

NAME	RELATIONSHIP	AGE
_____	_____	_____
_____	_____	_____
_____	_____	_____

IN CASE OF EMERGENCY:

NAME	ADDRESS	PHONE
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NUMBER OF CARS (TO BE PARKED AT PROPERTY) _____ (PLEASE LIST ALL BELOW)

**** (MUST PROVIDE COPY OF VEHICLE REGISTRATION) ****

MAKE: _____ MODEL: _____ YEAR: _____ TAG#: _____

MAKE: _____ MODEL: _____ YEAR: _____ TAG#: _____

PART I: RESIDENCE HISTORY

A. PRESENT ADDRESS: _____

APT. OR CONDO NAME: _____ PHONE: _____

DATE OF RESIDENCY _____ to _____

LANDLORD (or) MORTGAGE: _____ PHONE: _____

ADDRESS: _____ MORTGAGE #: _____

B. PREVIOUS ADDRESS: _____

APT. OR CONDO NAME: _____ DATE OF RESIDENCY _____

PART II: EMPLOYMENT REFERENCES

A. EMPLOYED BY: _____ PHONE: _____

DATES: FROM: _____ TO: _____ DEPT/POSITION: _____

APPROX MONTHLY INCOME \$ _____

ADDRESS: _____

B. CO-APPLICANT EMPLOYMENT: _____ PHONE: _____

DATES: FROM: _____ TO: _____ DEPT/POSITION: _____

APPROX MONTHLY INCOME \$ _____

ADDRESS: _____

REALTOR CONTACT INFORMATION:

NAME: _____ PHONE: _____

EMAIL: _____

APPLICANT SIGNATURE

CO-APPLICANT SIGNATURE



KINGS POINT
GOLF AND COUNTRY CLUB
Where Exceptional Lifestyle Begins

RENTAL and RESALE INFORMATION

ID OFFICE

561-499-3335 Ext. 136 & 135

Monday – Friday 9:00 AM – 4:00 PM

Closed Saturday and Sunday

Fees (All fees subject to change)

- **Capital Contribution & Processing Fee**-includes one (1) Resident ID Card & one (1) Barcode
\$2,000.00 (**Applicable to all resales and transfers of ownership as of January 1, 2025**)
- Resident ID \$60.00
- Single Resident ID \$60.00
- Lessee ID \$60.00
- Guest ID \$10.00 (See procedural guide for further details)
- Health Aide ID \$50.00 (Three months)
- Barcode \$10.00
- Saxony RFID Tag \$10.00

Requirements: Coincident with submission of an application for purchase of any unit, proof of payment of the Capital Contribution & Processing Fee **must be included**.

Before issuing **Resident ID cards**, we must receive the following:

- A copy of the Certificate of Approval from the association's management company approved by an association officer with the association seal and,
- The previous owner's ID card(s) must be turned in to Kings Point's ID office. If the ID card(s) cannot be located, a \$60 fee for each outstanding ID card must be paid before new ID cards will be issued. **Checks payable to: Kings Point Recreation Corp., Inc.**
- **Note:** Maximum of two (2) resident ID cards per unit. The first ID card purchased for a resident/lessee must be issued to an individual fifty-five (55) years of age or older.

Before we can issue **Lessee ID cards**, the ID office must receive the following:

- A copy of the Certificate of Approval from the association's management company approved by an association officer with the association seal, along with a lease and,
- Any outstanding ID cards issued for that unit must be turned in.
- As of August 6, 2015, any unit that is SOLD, if there is an existing lease on the unit AND the lessee turns in their ID cards, ID Cards can be purchased by the new owner, even if the lease has not expired.
- Any Owner or Tenant that breaks the lease, the existing rule below still follows:

Resident ID card(s) will not be issued or another Lessee ID card(s) will not be issued until the expiration of the current lease. No Exceptions!

Kings Point Recreation Area Amenities

The Recreation facilities consist of three (3) clubhouses, swimming pools, Natatorium, golf courses, tennis, shuffleboard, pickleball, bocce ball, racquetball and basketball courts, canals, entry gates and roads of the community and other common facilities. Kings Point is a “**NO PET**” community. The Recreation Area does not include condominium property and its parking areas or common grounds. Our residents also have use of the Kings Point buses. The buses serve the community, the immediate surrounding areas and shopping centers. To ensure that residents and their guests have exclusive access to all recreation facilities, a Kings Point ID is necessary. The ID cards are issued in the **ID Office located in the Administration Building**.

PLEASE READ CAREFULLY BEFORE SIGNING!!!!

*Signature: _____ *Signature: _____
Seller/Owner Buyer/Tenant

******Effective January 1, 2025******

Note: Capital Contribution & Processing Fee of \$2,000.00 payable to: Kings Point Recreation Corporation, Inc., the Not For Profit Corporation organized under Florida Statute 617, authorized to manage the Recreation Facilities, must be submitted with application for purchase.

7000 West Atlantic Avenue, Delray Beach, FL. 33446-1699, Telephone 561-499-3335

Valencia Condominium Association

and Regulations Acknowledgement Form

Date:_____

Unit Address : _____

I/We hereby agree to abide by all restrictions contained in the By-Laws, Rules and Regulations, Association Documents, Restrictions and Valencia Welcome Letter which are or may be imposed by the Valencia Area Condominium Association, Inc.

Signature Applicant

Date

Signature Co-Applicant

Date

AUTHORIZATION FOR BACKGROUND INVESTIGATION

By signing below you authorize the obtaining of investigative consumer reports by the Landlord/Property Manager at any time after receipt of this authorization. To this end, you authorize any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested about you by National Crime Search, LLC and/or the Landlord/Property Manager.

You understand that the scope of your authorization is not limited to the present and, if you are accepted, will continue throughout the course of your residency and allow the Landlord/Property Manager to conduct future screenings for retention, as permitted by law and unless revoked by you in writing*.

Print Full Legal Name:	
Other or Former Names (please print):	
Date of Birth**:	
Social Security Number:	
Address:	
City:	
County:	
State:	
Zip Code:	
Driver's License number:	
State License issued:	
Name on License (if different than legal name:	
Email Address:	
Phone Number:	
Signature:	
Date:	

***To perform a GA Statewide search, the GCIC requires the applicant to have signed the authorization form. The signed form is valid until the end of residency.**

****This information will be used for background screening purposes only and no other purpose.**

STATE LAW NOTICES AND DISCLOSURES – BACKGROUND INVESTIGATION

The following disclosures are being provided pursuant to state law.

MINNESOTA and OKLAHOMA: If you are a resident of Minnesota or Oklahoma, or applying for employment in one of these states, please check the box if you would like to receive a copy of your consumer report, free of charge, if one is obtained by the Landlord/Property Manager.

Check box to receive report ☐

MINNESOTA: If you are a Minnesota resident or applying for employment at a location within Minnesota, you have the right to submit a written request to National Crime Search, LLC | 3452 E Joyce Blvd, Fayetteville, AR 72703 | (888-527-3282) for a complete and accurate disclosure of the nature and scope of any consumer report the Landlord/Property Manager ordered about you. The consumer reporting agency must provide you with this disclosure within five days after its receipt of your request or the report was requested by the Landlord/Property Manager, whichever date is later.

NEW JERSEY: If you are a New Jersey resident or applying for employment at a location within New Jersey, you acknowledge receipt of the New Jersey Fair Credit Reporting Act provisions.

NEW YORK: If you are a New York resident or applying for employment at a location within New York, you have the right to inspect and receive a copy of any investigative consumer report requested by the Landlord/Property Manager by contacting National Crime Search, LLC | 3452 E Joyce Blvd, Fayetteville, AR 72703 Phone: (888-527-3282).

NEW YORK: If you are a New York resident or applying for employment at a location within New York, you acknowledge receipt of a copy of [Article 23-A](#) of the New York Correction Law.

RHODE ISLAND: If you are a resident of Rhode Island or applying for employment at a location within Rhode Island, the Landlord/Property Manager may request a credit report from a consumer reporting agency in connection with your application for employment.

VERMONT: If you are a Vermont resident or applying for employment at a location within Vermont, you acknowledge receipt of the NOTICE – BACKGROUND INVESTIGATION AND USE OF CREDIT INFORMATION.¹

WASHINGTON STATE: If you are a Washington resident or applying for employment at a location within Washington State, you have the right to request from National Crime Search, LLC | 3452 E Joyce Blvd, Fayetteville, AR 72703 | (888-527-3282) a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

¹ Pursuant to Vermont law, employers requesting a credit report must provide job applicants/employees with a notice identifying the specific basis under 21 V.S.A. § 495i for use of the report.

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer

reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a “security freeze” on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is

placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

Code E

TYPE OF BUSINESS:	CONTACT:
<p>1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552</p> <p>b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act.</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group P.O. Box 53570 Houston, TX 77052</p> <p>b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480</p> <p>c. Division of Depositor and Consumer Protection National Center for Consumer and Depositor Assistance Federal Deposit Insurance Corporation 1100 Walnut Street, Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Financial Protection 1775 Duke Street Alexandria, VA 22314</p>
<p>3. Air carriers</p>	<p>Assistant General Counsel for Office of Aviation Protection Department of Transportation 1200 New Jersey Avenue, SE Washington, DC 20590</p>
<p>4. Creditors Subject to the Surface Transportation Board</p>	<p>Office of Public Assistance, Governmental Affairs, and Compliance Surface Transportation Board 395 E Street, SW Washington, DC 20423</p>
<p>5. Creditors Subject to the Packers and Stockyards Act, 1921</p>	<p>Nearest Packers and Stockyards Administration area supervisor</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Administrator, Office of Capital Access United States Small Business Administration 409 Third Street, SW, Suite 8200 Washington, DC 20416</p>
<p>7. Brokers and Dealers</p>	<p>Securities and Exchange Commission 100 F Street, NE Washington, DC 20549</p>
<p>8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations</p>	<p>Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090</p>
<p>9. Retailers, Finance Companies, and All Other Creditors Not Listed Above</p>	<p>Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, NW Washington, DC 20580 (877) 382-4357</p>

Valencia Area Condominium Association Annual ESA Animal Registration

* For informational purposes only

Please note that this is a no-pet community. The promulgation of these regulations is necessary to ensure that residents have an amicable and peaceful place to live.

1. Definitions:

1. An **assistance animal** is an animal that provides assistance or perform tasks for the benefit of a person with a disability. Such animals are often referred to as “service animals,” “assistance animals,” “companion animals,” or “emotional support animals”. The use of assistance animals in housing is governed by federal and state fair housing laws.
2. A **service animal** means any animal that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual or other mental disability.
3. An **emotional support animal** (or **companion animal**) is an animal which provides therapeutic benefit, such as alleviating or mitigating some symptoms of the disability, to an individual with a mental or psychiatric disability. Emotional support animals are typically dogs and cats, but may include other animals.
4. Emotional support animals are not service animals under the ADA.
5. For purposes herein, emotional support animals and service animals shall be referred to as **Assistance Animals**.

*****ONLY (2) two ESA/Service Animals per person, a registration form MUST be completed for each animal and the applicant MUST provide documentation stating the need for each animal****

2. **All Assistance Animals must be registered as such and all applications must include documentation which validates their status as an Assistance Animal.** All Assistance Animals must be contained within the Unit all times or on a controlled leash no longer than six (6) feet (unless the Assistance Animal is a service animal and cannot be on a leash in order to perform the work or task for the benefit of the individual with a disability). Owners must have reasonable control over their Assistance Animals at all times. If the animal passes away a new application with corresponding paperwork must be submitted for any new Assistance Animal to be accepted.
3. No person shall tether, fasten, chain, tie or restrain any animal to anything outside of their unit or in the common elements. No person shall leave any animal unattended outside of their unit, on any porch or on any patio. All solid waste or droppings from the Assistance Animal must be placed in a sealed plastic bag and disposed of by the animals’ owner. The Owner of the Assistance Animal shall not permit the animal to urinate on walkways, or on common area plantings or decorative plantings.
4. All Assistance Animals must be registered with Management. All Assistance Animals must be keep up to date records on rabies vaccinations and all other vaccinations, as required by law. A current color picture of the Assistance Animal, proof of vaccination and registration must be provided to the Association on an annual basis.

5. Owners are responsible for any damage caused to the Common Elements or Association Property caused by their Assistance Animals. Owners shall be responsible for the activities of its Assistance Animal and liable for any damaged caused by said Assistance Animal.
6. No Assistance Animal shall be allowed to become a nuisance or create any unreasonable disturbance. Should a request for a reasonable accommodation to the Association's pet restrictions be granted, the Association reserves the right, pursuant to Florida law, to withdraw said approval at any time should the Assistance Animal become a nuisance to others, which includes, but it not limited to: barking, biting, aggressive behavior, attacking, the Owner's failure to properly dispose of excrement or waste, failure to comply with all state and local ordinances and statutes, failure to maintain the dog on a leash at all times when outside the unit (unless the accommodation requires the animal to be off the leash), insect/extermination problems, sanitation/odor problems, and/or violation of conditions of approval.
7. Assistance Animals shall not be kept, bred or used for any commercial purpose.
8. Neither the Board nor Association shall be liable for any personal injury, death or property damage resulting from a violation of the foregoing, and any occupant of a Unit committing such a violation shall fully indemnify and hold harmless the Board, each Unit Owner and Association.
9. Any violation of the provisions of these regulations shall entitle the Association to exercise all of its rights and remedies, including, but not limited to, the right to fine Unit Owners and/or to require any Assistance Animals to be permanently removed from the Condominium Property, subject to applicable law.
10. The Association shall be entitled to collect from the Unit Owner, resident and/or tenant, any and all attorney's fees and costs incurred as a result of enforcing the foregoing regulations.

Animal Name _____ Animal Age _____
Physical Description (for identification purposes only) _____

Rabies Vaccine History _____

Unit Owner Name _____

Address _____

Signature _____ Date _____

Board Signature _____ Date _____

Please attach a color photo of the applicant animal, ESA documentation and proof of inoculation.

CERTIFICATE OF APPROVAL FOR ADDITIONAL OCCUPANT

Valencia Area Condominium Association

This is to certify that

has been

APPROVED/DENIED

(Please circle one)

NOTE: Only the person(s) named are/is approved for residency.

At the above referenced Association, a Florida Not for Profit Corporation, as the new owner(s) of the following described real property at the address listed below which is in accordance with the provisions of the Association Declaration, Articles of Incorporation and By-Laws of the following address:

Such approval/denial has been given pursuant to the Association Declaration, Articles of Incorporation and By-Laws provisions and all Exhibits attached to the Declaration of Documents and any Amendments thereto, if any as recorded in Official Records Book of the County for the Association.

Walk Director Signature: _____ Date: _____

Walk Director Name: _____

Executive Director Signature: _____ Date: _____

Executive Director Name: _____

On behalf of the Association Board of Directors