



1300 NW 17<sup>th</sup> Ave. Suite 270  
Delray Beach, FL 33445  
(561)637-3402 Office (561)637-3407 Fax

**Instructions for Rental Application – PIEDMONT A ASSOCIATION, INC.**

- 1) APPLICATION MUST BE SUBMITTED AT LEAST THIRTY (30) DAYS PRIOR TO LEASE BEGINNING DATE.
- 2) **TWO (2) COMPLETE, SEPARATED SETS OF EVERYTHING LISTED BELOW MUST BE SUBMITTED.** (APPLICATION AND THE LEASE AGREEMENT CONSTITUTES ONE SET.) **ONE SET OF THESE MUST BE THE ORIGINAL PAPERWORK.**
- 3) EACH PAGE MUST BE PROPERLY COMPLETED.
- 4) EACH APPLICATION MUST INCLUDE A PHOTO ID (ON 8 ½ X 11 PAPER) SHOWING DATE OF BIRTH OF EACH OCCUPANT.
- 5) A \$150.00 NON-REFUNDABLE APPLICATION FEE PER PERSON OR MARRIED COUPLE IS REQUIRED ON ALL NEW LEASES. THE \$150.00 APPLICATION FEE MUST BE **MADE PAYABLE TO THE PIEDMONT A ASSOCIATION, INC.**
- 6) THE VESTA PROPERTY SERVICES INFORMATION PAGE AT THE END OF THIS APPLICATION MUST BE SIGNED.
- 7) ALL THREE PERSONAL REFERENCE SHEETS **MUST BE COMPLETE, SIGNED, AND PART OF THIS APPLICATION.**
- 8) **PIEDMONT A ASSOCIATION IS A NO PET COMMUNITY.**
- 9) **NO NEW OWNER MAY LEASE HIS/HER UNIT DURING THE INITIAL EIGHTEEN (18) MONTHS OF OWNERSHIP. NO EXCEPTIONS WILL BE MADE.**

**ALL MATERIALS MUST BE PROPERLY COMPLETED AND SUBMITTED TOGETHER OR THIS APPLICATION PACKET MAY NOT BE PROCESSED. OUR OFFICE WILL DO ITS BEST TO EXPEDITE ALL PAPERWORK IN A TIMELY FASHION. WE WOULD LIKE TO CONVEY TO YOU THAT MOST DELAYS ARE CAUSED BY INCOMPLETE PAPERWORK. PLEASE LOOK OVER THESE INSTRUCTIONS CAREFULLY. PLEASE CALL OUR OFFICE (561) 637-3402 WITH ANY QUESTIONS BEFORE SENDING COMPLETED PACKETS IN.**

NOTE: IF YOU WOULD LIKE A COPY OF THE CERTIFICATE OF APPROVAL, PLEASE PROVIDE OUR OFFICE WITH YOUR CURRENT INFORMATION ON THE BOTTOM OF PAGE 2 OF THE APPLICATION

# Wilson Landscaping & Management Corp.

1300 NW 17<sup>th</sup> Ave. Suite 270

Delray Beach, Florida 33445

Phone (561)637-3402 Fax (561)637-3407

## RENTAL INFORMATION SHEET

Association: PIEDMONT A ASSOCIATION, INC. Unit: \_\_\_\_\_

Name of Owner (s): \_\_\_\_\_

Owner (s) Address: \_\_\_\_\_

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

Owner(s) Phone Number: \_\_\_\_\_ Owner(s) Cell: \_\_\_\_\_

Owner's E-Mail Address: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ SS#: \_\_\_\_\_ Age: \_\_\_\_\_

Co-Applicant: \_\_\_\_\_ SS#: \_\_\_\_\_ Age: \_\_\_\_\_

Applicant(s) Address: \_\_\_\_\_

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

Applicant(s) Phone Number: \_\_\_\_\_ Applicant(s) Cell: \_\_\_\_\_

### Vehicle Information:

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Plate#: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Plate#: \_\_\_\_\_

### PLEASE LIST ALL OCCUPANT(S) WHO WILL RESIDE AT UNIT IF APPROVED:

Name	Relationship to Applicant	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____

### PLEASE PROVIDE NAME AND ADDRESS OF WHERE TO SEND APPROVED CERTIFICATE OF APPROVAL:

\_\_\_\_\_  
\_\_\_\_\_

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## LESSEE AGREEMENT

In making this application to lease the unit noted on page one of this application; I/we understand that acceptance of the application is conditioned on the approval of the Board of Directors and that the decision they make is final.

- Agree that if the application is approved, to abide by all the Rules and Regulations, By-Laws and any and all restrictions of the the Association and any changes that may be imposed in the future.
- Agree and understand that at least one (1) occupant of the unit must be over the age of fifty-five (55) at all times.
- Agree and understand that no new owner may lease his/her unit during the initial eighteen (18) months of ownership. No exceptions will be made.
- LESSEE(S), acknowledge receipt of the Rules and Regulations, Association By-Laws, Association Declaration of Condominium and any and all Amendments and understand that the unit may not be sub-leased.
- Have enclosed a check in the amount of \$150.00 **PER PERSON OR MARRIED COUPLE** payable to **PIEDMONT A** Association as provided for by Florida Statutes and by the Condominium Documents.
- Understand that if any check paid by the Owner(s), and/or Lessee(s) is returned unpaid; any approval granted will be voided.
- Understand that the Association is a **NO PET COMMUNITY**.

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Applicant's Signature

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Date

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Applicant's Signature

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Date

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## AGE VERIFICATION QUESTIONNAIRE

Association: PIEDMONT A ASSOCIATION, INC. Unit: \_\_\_\_\_

Please list every person who will be residing at this address during the lease period. Please supply independent photographic evidence indicating date of birth (*such as Driver's License or Passport*) of each occupant.

LESSEE(S) NAME	AGE	TYPE OF ID	DOB	RELATIONSHIP

Signature(s) of Lessee(s)

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

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

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

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

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

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## REQUEST FOR PERSONAL REFERENCE

Association: PIEDMONT A ASSOCIATION, INC. Unit: \_\_\_\_\_

Dear Sir/Madam:

\_\_\_\_\_ has listed you as a character reference in an application to lease an apartment in the above referenced Condominium Association.

As part of the application process, we respectfully request any information you can give use regarding their character and integrity. Please respond by providing brief comments in the space provided below, as quickly as possible.

Failure to return immediately could result in unnecessary delays to the Applicant's closing and/or move in date. The Association requires a minimum of thirty (30) days to properly review, approve and submit approval prior to the actual move in and/or closing date.

Thank you in advance for your valuable assistance, and we assure you that your reply will be kept confidential.

CHARACTER:

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INTEGRITY:

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OTHER COMMENTS:

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Phone/Cell Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

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INTEGRITY:

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OTHER COMMENTS:

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Phone/Cell Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

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CHARACTER:

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INTEGRITY:

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OTHER COMMENTS:

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Phone/Cell Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

**PIEDMONT A ASSOCIATION, INC.  
LEASE ENFORCEMENT AGREEMENT**

THIS AGREEMENT made this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by and between \_\_\_\_\_ ("Landlord"), \_\_\_\_\_ ("Tenant(s)") and the **PIEDMONT A ASSOCIATION, INC.** ("Association").

1. Landlord is the owner of the following Unit within the **PIEDMONT A ASSOCIATION**, unit # \_\_\_\_\_, located in Delray Beach, FL.
2. Tenant(s) is the lessee of the Unit pursuant to that certain residential lease dated \_\_\_\_\_, 20\_\_\_\_, a true copy of such residential lease being attached hereto as Exhibit "A".
3. Association is the condominium association operating the **PIEDMONT A ASSOCIATION** in which the unit is located.
4. Landlord and Tenant(s) have requested that the Association approve Landlord's leasing of the Unit to Tenant(s), pursuant to the written lease attached hereto. The Association desires to grant approval for Landlord to lease the Unit if the Association and the other residents of the **PIEDMONT A ASSOCIATION** are adequately protected.
5. Tenant(s) agrees to obey and occupy the Unit in accordance with all use restrictions applicable to the **PIEDMONT A ASSOCIATION**, including the Declaration of Covenants; Articles of Incorporation and Bylaws of the Association; Rules and Regulations; and any policies of the Association or master association, all as amended (collectively "Use Restrictions").
6. If Landlord defaults in payment of Association's assessments, then Landlord and Tenant(s) agree that Tenant(s) shall, upon written demand by Association, pay the rent to the Association to satisfy the assessment obligation, including any interest, costs, and attorneys fees. In such event, Tenant(s) shall commence paying the rent within ten (10) days of written demand from Association until Association notifies Tenant(s) that the delinquent assessments, including any interest, costs and attorneys fees, are paid in full.
7. If the Tenant(s) should violate any of the Use Restrictions, or violate this Agreement, Tenant(s) and Landlord agree that the Association may itself bring an action against the Tenant(s) to evict the Tenant(s) and/or to enforce the Use Restrictions or this Agreement. The Association may, but is not obligated, to name the Landlord also as Defendant. In any eviction action, the Association may utilize the summary procedure provided in Chapter 51, Fla. Stat. The Association's remedy of bringing an eviction action is in addition to and not in substitution of any other remedy available to the Association pursuant to the governing documents and Florida Statutes.
8. In any action filed by the Association, the Association may recover its attorney's fees and costs against the Tenant(s), and/or against the Landlord, or of both are joined a Defendants, against both jointly and severally.
9. The Association is not responsible as to the condition and usability of the Unit. The Association makes no representations, express or implied, about the condition or habitability of the Unit or about the common areas. The Tenant(s) shall look solely to the Landlord as to the condition and usability of same.



IT WITNESS WHEREOF, the parties hereby execute this Agreement.

\_\_\_\_\_  
First Witness as to Both

\_\_\_\_\_  
Landlord

\_\_\_\_\_  
Second Witness as to Both

\_\_\_\_\_  
Landlord

Date: \_\_\_\_\_

\_\_\_\_\_  
First Witness as to Both

\_\_\_\_\_  
Tenant

\_\_\_\_\_  
Second Witness as to Both

\_\_\_\_\_  
Tenant

Date: \_\_\_\_\_

**PIEDMONT A ASSOCIATION, INC.**

\_\_\_\_\_  
First Witness

\_\_\_\_\_  
By: \_\_\_\_\_

\_\_\_\_\_  
Its: \_\_\_\_\_

\_\_\_\_\_  
Second Witness

Date: \_\_\_\_\_



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  
**\$1,800.00** (**Applicable to all resales and transfers of ownership as of June 1, 2022**)
- 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 consists 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 assure 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 June 1, 2022\*\*\*\***

Note: **Capital Contribution & Processing Fee** of \$1,800.00 *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

**KINGS POINT USER ACCOUNT REGISTRATION**  
**SIGN IN or CREATE AN ACCOUNT at the [kingspointdelray.com](http://kingspointdelray.com) website**

The enhanced access control system is ready to launch and will be linked to the Kings Point ID system so that you can start developing your list of friends and family for your Permanent/ Temporary/ Vendor gate access.

1. Every resident that has a Community ID are already in the ID system. Those of you that have purchased theater tickets using the internet have already activated their accounts.
2. For each resident, there will only be ONE account. It will allow you to maintain a Permanent/ Temporary/Vendor Guest list, purchase tickets to our theater and register for "T Times" at the golf course. It will also link purchased theater tickets into the data base so that security will know who is on our property. Remember – persons who do not have ID cards will not be able to activate an account.
3. Activate your account by going to the [kingspointdelray.com](http://kingspointdelray.com) website.
  - a. On the "Home Page" click on the "Gate Access/Visitor Management" link in order to sign in or create an account.
  - b. Click on "Create Account" and a new screen will appear. The badge number and name you fill in must match the name as it appears on your ID. When creating your account you select a user name and the password. Note the password restrictions listed at the bottom of the page. Make sure that you keep your user name and password in a safe place, as you will need it every time you access your account. When completed, click on "Create User" at the bottom of the page. You have now completed your part of the activation process.
  - c. You will be notified when your account has been activated (within 72 hours).
4. If two persons living in a unit have different last names, it is advisable for each to activate his/her own account. The two accounts will be linked by unit address so that when purchasing tickets during the restricted period, a unit can still only purchase two tickets.
5. Populate your account by going to the [kingspointdelray.com](http://kingspointdelray.com) website and click on the "Gate Access/Visitor Management" link.
  - a. Click on "Sign In" and enter your user name and password.
  - b. Click on "Sign Me In" and fill in the data requested. Permanent Visitors do not need a visit date. Temporary Visitors will need to fill in the dates for each visitor. Names on the "Temporary" list are automatically deleted at the end of their authorized access time.
  - c. The "Permanent" list will be updated on an annual basis.
  - d. Vendors that issue their employees identification cards, i.e. the Post Office and FedEx do not need to be added to your list.
6. **Do not have a computer?** Call the Staff Office at 561-499-3335/ 561-499-7751 Ext. 225 for an appointment. The Staff will help you activate your account and enter the data.
7. Target date to activate the system at the Normandy Gate is on Monday, May 4th. Once the system is running smoothly at the Normandy Gate, the other manned gates at Kings Point will be implemented.

Like any new major change, this will require your patience as it is a massive programming effort with links to several existing systems. However, you can help in the implementation if you are a resident by obtaining your Kings Point ID. All Residents and Lessees with a vehicle should purchase a barcode for easy access thru the gates.