CYPRESS ISLAND PROPERTY OWNERS ASSOCIATION, INC.
C/O Sea Breeze Community Management Services, Inc.
4227 Northlake Boulevard
Palm Beach Gardens, FL, 33410
PH (561)626-0917 Fax (561)626-7143
www.seabreezecms.com

Instructions Pool Use Application Form

1. Fill in application and security resident registration sheet completely. If the application is not completely filled out it will be returned. The Rules and Regulations should be initialed on the bottom of each page by the prospective applicant.

2. A copy of driver's license of each applicant MUST be included.

3. If the Association declines approval of an application then the Association may exercise its right of first refusal as provided in Article XV of the Declaration of Covenants and Restrictions for Cypress Island.

4. Provide a copy of proof insurance paperwork as submitted to the Marina Completed package may be left for pickup with security or submit the entire package to the address above.

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APPLICATION FOR POOL USE
PLEASE PRINT OR TYPE ALL INFORMATION ON THESE FORMS

$100 Per month payable in advance 3 month minimum
$50 One time application fee (non-refundable)
$50 Refundable key deposit
ALL Fees MUST accompany application
I/We acknowledge receipt of the following: provided by The POA Pool Rules and Regulations

I/We agree to observe and abide by the terms and conditions stated in these documents.

Signature Date:_____

Signature Date:_____

CYPRESS ISLAND PROPERTY OWNERS ASSOCIATION, INC. APPLICATION FOR POOL USE

Slip Owner-Lessee Information
Name:_____Telephone:_____ Slip Number: _____
_____
Mailing Address:

Telephone:_____ Mobile Telephone Number:_____

Email Address:_____

Vehicle #1 Make:_____ Model: _____Tag:_____

Vehicle #2 Make:_____ Model: _____Tag:_____

Personal References:
Name:_____Phone:_____ Address:_____
_____ Name:_____Phone:_____
Address: _____

------Int
------Int

SECURITY BACKGROUND OF APPLICANT(S)

I UNDERSTAND A NATINOWIDE LAW ENFORCEMENT INVESTIGATION IS REQUIRED AND WILL BE DONE.

Have you [or another applicant] ever been convicted of a state or federal offense? yes no Have you [or other applicant] ever been convicted of a felony in the past 7 years? yes no Are you [or other applicant] presently awaiting trial on any criminal offence? yes no

IF YES TO ANY OF THE ABOVE, GIVE APPLICANT'S NAME, DATES, NAME OF COURT AND DETAILS OF CONVICTION

BOAT INFORMATION
Boat Name_____Make_____Type_____ Length___Registration #_
_____Slip_____ Boat Telephone(s)_____
_____

I/We declare the above information to be true and correct.

Signature of Applicant 1_____ Date_____

Printed Name of Applicant 1_____

Signature of Applicant 2_____ Date_____

Printed Name of Applicant 2_____

CYPRESS ISLAND POOL RULES AND REGULATIONS

1. Children under the age of 12 are not permitted in the pool or on the common elements unless accompanied by an adult defined as 18 or older.
2. No running or diving
3. Pets are prohibited in the pool and clubhouse area-service dogs permitted
4. Glass containers are not permitted in both the pool and clubhouse area
5. Association Homeowners, their tenants and guests shall dress appropriately at pool and when coming to and from the pool area.
6. Use of the pool is at homeowners risk as the association does not provide life guards.
7. Homeowners shall not tamper with or adjust the pool equipment or temperature controls.
8. Appropriate swimming diapers are required for those who are not potty trained or are incontinent.
9. Shower before entering the pool
10. No bicycles or skateboards are allowed in the pool and clubhouse area.
11. No private property/ toys may be left in the pool area overnight.
12. Only water toys are allowed for use in the pool.
13. Food is allowed in covered porch area only
14. All trash is to be disposed of properly prior to leaving the pool/clubhouse area
15. Pool hours Dawn to Dusk.
16. No excessive noise, Radio with headphones only.
17. Anyone abusing the pool and clubhouse area will be assessed for the damages
18. All clubhouse use must be reserved with Sea Breeze Mgmt. for Cypress Island residents only
19. Homeowners are responsible for the conduct of their guests and are requested to accompany them to the pool whenever possible. Limit of 4 guests permitted
20. Parking is limited to vehicles with handicap placards – please be respectful of the Marina parking area

As owner/renter of _____

a) I have read rules of the Pool and Clubhouse.
b) I have accepted entry fob #_____

Signature_____ Date_____

------Int
------Int

Sea Breeze – Cypress Island POA / Ref# _____

RESIDENTIAL SCREENING REQUEST

First: _____ Middle: _____ Last: _____

Address: _____

City: _____ ST: _____ Zip: _____

SSN: _____ DOB (MM/DD/YYYY): _____

Tel#: _____ Cel#: _____

Current Employer

Company: N/A Tel#: N/A

Supervisor: N/A Salary: N/A

Employed From: N/A To: N/A Title: N/A

Current Landlord

Company: N/A Tel#: N/A

Landlord: N/A Rent: N/A

Rented From: N/A To: N/A

I have read and signed the Disclosure and Authorization Agreement.

SIGNATURE: _____ **DATE:** _____

DISCLOSURE AND AUTHORIZATION AGREEMENT
REGARDING CONSUMER REPORTS

DISCLOSURE

A consumer report and/or investigative consumer report including information concerning your character, employment history, general reputation, personal characteristics, criminal record, education, qualifications, motor vehicle record, mode of living, credit and/or indebtedness may be obtained in connection with your application for residence.

AUTHORIZATION

You hereby authorize and request, without any reservation, any present or former employer, school, police department, financial institution, division of motor vehicles, consumer reporting agency, or other persons or agencies having knowledge about you to furnish AmeriCheckUSA with any and all background information in their possession regarding you, in order that your residence qualifications may be evaluated. You also agree that a fax or photocopy of this authorization with your signature be accepted with the same authority as the original.

READ, ACKNOWLEDGED AND AUTHORIZED

_____
Print Name

_____ _____
Signature Date

☐ For California, Minnesota or Oklahoma applicants only, if you would like to receive a copy of the report, if one is obtained, please check the box.