

## **DOCUMENTS CHECK LIST**

- 1. Copy of Contract**
- 2. Application to Purchase**
- 3. Application for Occupancy**
- 4. Authorization Form**
- 5. \$200.00 For Application Fee**
- 6. Proprietary Lease**
- 7. Assignment of the Lease**
- 8. Certificate of Designated Voter**
- 9. Copy of Driver's License**

**READ FIRST:** Complete all questions and fill in all blanks. All information supplied is subject to verification. If any question is not answered/left blank, or answered falsely, this application may be returned, not processed, and/or not approved. Missing information will cause delays. Once submitted, order can be cancelled but your fee will not be refunded. Rev. 06/2014

**\*\* THIS APPLICATION IS FOR A SINGLE PERSON OR A MARRIED COUPLE ONLY! \*\***

## **APPLICATION FOR OCCUPANCY**

Association Name: Crane Crest Apartments

Circle one: Purchase - Lease - Occupant - Unit.# \_\_\_\_\_ Bldg.# \_\_\_\_\_ Address applied for: \_\_\_\_\_

Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_

Circle One: Single - Married - Separated - Divorced - How Long? \_\_\_\_\_ Other legal or maiden name \_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_ Date (s) \_\_\_\_\_ County/State Convicted in \_\_\_\_\_

Charge (s) \_\_\_\_\_

Applicant's Cell Number(s) \_\_\_\_\_ Applicant's Email Address \_\_\_\_\_

Spouse \_\_\_\_\_ Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_

Other legal or maiden name \_\_\_\_\_ Have you ever been convicted of a crime? \_\_\_\_\_ Date (s) \_\_\_\_\_

County/State Convicted in \_\_\_\_\_ Charge (s) \_\_\_\_\_

Spouse's Cell Number(s) \_\_\_\_\_ Spouse's Email Address \_\_\_\_\_

No. of people who will occupy unit – Adults (over age 18) \_\_\_\_\_ Description of Pets \_\_\_\_\_

Names and ages of others who will occupy unit \_\_\_\_\_

In case of emergency notify \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

### **PART I – RESIDENCE HISTORY**

A. Present address \_\_\_\_\_ Phone \_\_\_\_\_  
(Include unit/apt number, city, state and zip code)

Apt. or Condo Name \_\_\_\_\_ Phone \_\_\_\_\_ Dates of Residency: From \_\_\_\_\_ to \_\_\_\_\_

Circle one: Own Home - Parent/Family Member - Rented Home - Rented Apt - Other \_\_\_\_\_ Rent/Mtg Amount \_\_\_\_\_

Are you on the Lease? \_\_\_\_\_ If not, who is the leaseholder? \_\_\_\_\_ Are you on the Deed? \_\_\_\_\_ If yes, under what name? \_\_\_\_\_

Name of Landlord \_\_\_\_\_ Phone \_\_\_\_\_ Email address \_\_\_\_\_

Circle one: Is your Landlord the: Owner of the property - Realtor - Family Member - Roommate - Property Manager - Other \_\_\_\_\_

B. Previous address \_\_\_\_\_  
(Include unit/apt number, city, state and zip code)

Apt. or Condo Name \_\_\_\_\_ Phone \_\_\_\_\_ Dates of Residency: From \_\_\_\_\_ to \_\_\_\_\_

Circle one: Own Home - Parent/Family Member - Rented Home - Rented Apt - Other \_\_\_\_\_ Rent/Mtg Amount \_\_\_\_\_

Were you on the Lease? \_\_\_\_\_ If not, who is the leaseholder? \_\_\_\_\_ Were you on the Deed? \_\_\_\_\_ If yes, under what name? \_\_\_\_\_

Name of Landlord \_\_\_\_\_ Phone \_\_\_\_\_ Email address \_\_\_\_\_

Circle one: Is your Landlord the: Owner of the property - Realtor - Family Member - Roommate - Property Manager - Other \_\_\_\_\_

C. Previous address \_\_\_\_\_  
(Include unit/apt number, city, state and zip code)

Apt. or Condo Name \_\_\_\_\_ Phone \_\_\_\_\_ Dates of Residency: From \_\_\_\_\_ to \_\_\_\_\_

Circle one: Own Home - Parent/Family Member - Rented Home - Rented Apt - Other \_\_\_\_\_ Rent/Mtg Amount \_\_\_\_\_

Were you on the Lease? \_\_\_\_\_ If not, who is the leaseholder? \_\_\_\_\_ Were you on the Deed? \_\_\_\_\_ If yes, under what name? \_\_\_\_\_

Name of Landlord \_\_\_\_\_ Phone \_\_\_\_\_ Email address \_\_\_\_\_

Circle one: Is your Landlord the: Owner of the property - Realtor - Family Member - Roommate - Property Manager - Other \_\_\_\_\_

## PART II – EMPLOYMENT REFERENCES

\*Include a recent copy of an earnings statement to expedite processing\*

- A. Employed by \_\_\_\_\_ Phone \_\_\_\_\_  
Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_ Position \_\_\_\_\_ Fax \_\_\_\_\_  
Monthly Gross Income \_\_\_\_\_ Address \_\_\_\_\_
- B. Spouse Employed by \_\_\_\_\_ Phone \_\_\_\_\_  
Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_ Position \_\_\_\_\_ Fax \_\_\_\_\_  
Monthly Gross Income \_\_\_\_\_ Address \_\_\_\_\_

## PART III – CHARACTER REFERENCES (No Family Members)

1. Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address \_\_\_\_\_ Business Phone \_\_\_\_\_  
Email Address \_\_\_\_\_ Cellular Phone \_\_\_\_\_
2. Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address \_\_\_\_\_ Business Phone \_\_\_\_\_  
Email Address \_\_\_\_\_ Cellular Phone \_\_\_\_\_
3. Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address \_\_\_\_\_ Business Phone \_\_\_\_\_  
Email Address \_\_\_\_\_ Cellular Phone \_\_\_\_\_
4. Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address \_\_\_\_\_ Business Phone \_\_\_\_\_  
Email Address \_\_\_\_\_ Cellular Phone \_\_\_\_\_

Are you using a realtor? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes: Realtor's name \_\_\_\_\_  
Email Address \_\_\_\_\_ Cellular Phone \_\_\_\_\_

Driver's License Number (Primary Applicant) \_\_\_\_\_ State Issued \_\_\_\_\_  
Driver's License Number (Secondary Applicant) \_\_\_\_\_ State Issued \_\_\_\_\_  
Make \_\_\_\_\_ Type \_\_\_\_\_ Year \_\_\_\_\_ License Plate No. \_\_\_\_\_  
Make \_\_\_\_\_ Type \_\_\_\_\_ Year \_\_\_\_\_ License Plate No. \_\_\_\_\_

If this application is not legible or is not completely and accurately filled out, Associated Credit (and the Association) will not be liable or responsible for any inaccurate information in the investigation and related report (to the Association) caused by such omissions or illegibility.

By signing the applicant recognizes that the Association and Associated Credit will investigate the information supplied by the applicant, and a full disclosure of pertinent facts will be made to the Association. The investigation may be made of the applicant's character, general reputation, personal characteristics, credit standing, police arrest record and mode of living as applicable. This form is for the exclusive use of Associated Credit Reporting, Inc.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_ Spouse's Signature \_\_\_\_\_ Date \_\_\_\_\_

# ***ASSOCIATED CREDIT REPORTING, INC.***

Established 1985

4690 NW 103rd Avenue, Sunrise, Florida 33351  
www.associatedcreditreporting.com

Phone: 754-216-0025  
Toll Free: 800-676-7640  
Fax: 954-635-2157  
Toll Free Fax: 800-235-7185

## **\*\*\*AUTHORIZATION FORM\*\*\***

I/We hereby authorize **Associated Credit Reporting, Inc.** to obtain data to verify any and all information they request with regards to my/our Application for Occupancy, specifically the verification of my credit history, residential history, criminal record history, employment verification and character references.

I/We hereby waive any privileges I/we may have with respect to the said information in reference to its release to the aforesaid party. Information obtained for this report is to be released to the authorized party designated on the Application for Occupancy, for their exclusive use only. **PLEASE INCLUDE COPY OF DRIVER'S LICENSE TO CONFIRM IDENTITY.** If you do not have a driver's license, please include a copy of your Passport or current government issued identification card.

I/We acknowledge our rights as stated in the Fair Credit Report Act that I/we are entitled to a copy of the report upon proper written request and can dispute any inaccurate information for re-verification. I/We understand that Associated Credit Reporting, Inc. is not directly involved in the approval or denial of any applicant. The information received by Associated Credit Reporting, Inc. shall be held in strict confidence, protected as governed under the Fair Credit Reporting Act, and will never be released to any third party other than the designated recipient. I/We further understand that this is a non-refundable process.

By signing below, I/We further state the Application for Occupancy and Authorization Form were signed by me/us and was not originated with fraudulent intent by me/us or any other person and that the signature(s) below are my/our own proper legal signature. I/We certify (or declare) under penalty of perjury that I/We agree to the foregoing and; that all answers and information contained on the Application for Occupancy are true and correct and will hold Associated Credit Reporting, Inc. harmless from the result of the investigation.

\_\_\_\_\_  
(Applicant's Signature)

\_\_\_\_\_  
(Spouse's Signature)

\_\_\_\_\_  
(Applicant's Name Printed)

\_\_\_\_\_  
(Spouse's Name Printed)

\_\_\_\_\_  
(Date Signed)

\_\_\_\_\_  
(Date Signed)



**CRANE CREST APTS, INC.  
1850 S. OCEAN BLVD.  
Lauderdale by the Sea, FL 33062**

**APPLICATION FOR PURCHASE**

1. This application and the attached application for occupancy must be completed in detail by the proposed purchaser.
2. Please attach a non-refundable processing fee of \$200.00 to this application, made payable to Crane Crest Apts. Inc. This is to be paid by owner/lessee.
3. The completed application must be submitted to the Association office at least 30 days prior to the expected closing date.
4. All prospective purchasers must be present for personal interview when set by the Board of Directors.
5. Purchaser must notify the Association office with the exact date of their closing (941-6856)
6. Apartment may not be occupied by new leaseholder until Board approval has been granted and official consent to Assignment of lease is issued by the Board with corporate seal affixed.
7. No pets allowed at any time except for a caged Bird.
8. Use of this Unit is for single family residence. No Corporation, Company, or Partnership may purchase a Unit.
9. No Commercial overnight vehicles, Boats, Trailers, Motor Homes, Mobile Homes, Campers, Trucks, Recreational Vehicles, Motorcycles, mopeds, etc. are permitted to park east of A1A.
10. Only 1 assigned parking space available per unit. Additional parking is available only in the lot across the street.
11. Moving of furniture in or out of an apartment is not permitted on Sundays. Hours for moving are from 8:00 A.M. to 5:00 P.M., Monday through Saturday.
12. Apartment may not be subleased except as provided for in By-Laws and then only with prior approval of the Board after submission of all prescribed forms and procedures. Only one sublease in the lifetime of ownership is permitted.
13. All commercial vehicles must be parked west of A1A. Trailered boats, trailers, mobile homes and motor homes are Permitted to park only west of A1A. Motor cycles may be parked in the garage only if equipped with a muffler.

**YOU MUST PRINT OR TYPE ALL INFORMATION ON THESE FORMS**

Date \_\_\_\_\_ Apt. No. \_\_\_\_\_ Approx. closing date \_\_\_\_\_

Owner's name \_\_\_\_\_ Tele. no. \_\_\_\_\_

Present Address \_\_\_\_\_

Name of Realtor handling sale \_\_\_\_\_  
Tele. no. \_\_\_\_\_

**Name of prospective Purchaser (as title will appear):**

a. \_\_\_\_\_ b. \_\_\_\_\_ (spouse)

**Other persons who will occupy the apartment with you:**

<u>Name</u>	<u>Age</u>	<u>Relationship / occupation</u>
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Have you ever seasonally resided in Florida before? \_\_\_\_\_ If yes, please state the name, address and dated of residency:

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

In making the foregoing application, I represent to the Board of Directors that the purpose for the Purchase of an apartment at CRANE CREST APTS. is as follows:

Permanent Residence \_\_\_\_\_ Seasonal Residence \_\_\_\_\_ Other \_\_\_\_\_

(Explain) \_\_\_\_\_

**I hereby agree for myself and on behalf of all persons who may use the apartment which I seek to purchase that I will abide by all of the restrictions contained in the By-Laws, House Rules and Regulations, Cooperative Documents, and restrictions which are or may in the future be imposed by the CRANE CREST APARTMENT, INC.**

I have received, read and understand all Cooperative Documents: Yes \_\_\_\_\_ No \_\_\_\_\_

I have received, read and understand the Cooperative Rules & Regulations: Yes \_\_\_\_\_ No \_\_\_\_\_

I understand that I will be advised by the Board of Directors of either acceptance or denial of this application.

If my application to purchase is accepted, I will provide a copy of the recorded Proprietary Lease to the Board of Directors within 30 days after closing.

I understand that the acceptance for purchase of an apartment at CRANE CREST APTS. is conditioned upon the truth and accuracy of this application and upon the approval of the Board of Directors. Any misrepresentation or falsification of the information on these forms will result in the automatic rejection of this application. Occupancy prior to Board of Directors approval is prohibited.

I understand that the Board of Directors of CRANE CREST APTS. , INC. may cause to be instituted an investigation of my background as the Board may deem necessary. Accordingly, I specifically authorize the Board of Directors, in accordance with the by-laws, to make such investigation and agree that the information contained in this and the attached application may be used in such investigation, and that the Board of Directors and Officers of the CRANE CREST APTS., INC. itself shall be held harmless from any action or claim by me in connection with the use of the information contained herein or any investigation conducted by the Board of Directors.

I further agree that the Board of Directors shall have the right to reject this application for any reason, and that no liability to CRANE CREST APTS. , INC. or to its Board of Directors incur because of such rejection; that the reason for such rejection need not be given; that the decision of the Board shall be final.

In making the foregoing application, I am aware that the decision of the CRANE CREST APTS. will be final and no reason will be given for any action taken by the Board of Directors.

APPLICANT \_\_\_\_\_

APPLICANT \_\_\_\_\_

OWNER/LESSEE \_\_\_\_\_

OWNER/LESSEE \_\_\_\_\_

Date \_\_\_\_\_ 20\_\_\_\_\_

## ASSIGNMENT OF THE LEASE

KNOW ALL MEN BY THESE PRESENTS, that \_\_\_\_\_,  
\_\_\_\_\_, of \_\_\_\_\_

In consideration of the sum of TEN DOLLARS, and other valuable consideration  
and other valuable consideration to \_\_\_\_\_ in hand paid  
by \_\_\_\_\_

Of \_\_\_\_\_  
the receipt and sufficiency of which is hereby acknowledged, do hereby assign,  
transfer and set over unto the said \_\_\_\_\_

\_\_\_\_\_, \_\_\_\_\_ Successors and assigns, the following  
described Lease and all of the right, title and interest of the undersigned

therein, as Lessee(s),  
together with all right, title and interest which may now have accrued of which may  
accrue at any future date in and to the cooperative corporation known as CRANE  
CREST APARTMENTS, INC> all relating to the following described property, to  
wit;

Apartment No. \_\_\_\_\_ Garage Space No. \_\_\_\_\_ Carport Space No. \_\_\_\_\_  
In CRANE CREST APARTMENTS, INC., located at 1850 South Ocean Boulevard  
(A-1-A) Pompano Beach, Florida; being further described as situate, lying and  
being in Broward County, Florida and being:

A parcel of land in Government Lot One (1), Section 7,  
Township 49 South, Range 43 East, Broward County, Florida,  
Bounded as follows: EAST of State Road No. A-1-A on the  
North by a line parallel to and 4350 feet southerly from,  
Measured at right angles to, the East and West Quarter-  
Section line in Section 6, of said Township and Range; on  
The South by a line 2080 feet northerly from, measured at  
Right angles to, the South line of the Northwest Quarter  
(NW 1/4) of the Southeast Quarter (SE 1/4) and the easterly  
Extension of said South boundary; on the west by the easterly  
Right-of-way line of State Road No. A-1-A; and on the East by the  
Waters of the Atlantic Ocean; West of State Road No. A-1-A on the  
North by a line parallel to 4350 feet southerly from, measured at  
Right angles to, the East and West Quarter-Section line in Section 6  
Of said township and Range; on the South, by a line parallel to and  
1861.75 feet southerly from, measured at right angles to, the North  
Boundary of said Section 7; on the west by the West line of said  
Government Lot 1; on the West by the West line of Said Government  
Lot 1; and on the East by the westerly right-of-way line of State Road  
No. A-1-A.

TO HAVE AND TO HOLD the foregoing Lease and all the lessees' interest  
Therein unto the said \_\_\_\_\_  
Successors and assigns, for the unexpired term of said Lease

This assignment is made subject to all of the terms, conditions and agreements in  
said Lease, and to all of the agreements, covenants and obligations in said Lease on  
the part of the Lessees therein to be kept and performed.

This assignment is made subject to the provisions of the By-Laws of the Lessor Corporation, which said By-Laws, and any future amendments thereto are Incorporated herein and expressly made a part hereof as fully and to all intents and purposes as if fully set forth herein

And the undersigned, \_\_\_\_\_  
Covenants with said \_\_\_\_\_

That \_\_\_\_\_ will reimburse  
the said \_\_\_\_\_ for any or all  
Assessments which relate to the period of time during which the  
Undersigned \_\_\_\_\_ were the owner(s) of subject  
apartment.

IN WITNESS WHEREOF, the undersigned \_\_\_\_\_  
\_\_\_\_\_, Have hereunto set \_\_\_\_\_ hand(s)

And seal(s) this \_\_\_\_\_ day of \_\_\_\_\_ AD, \_\_\_\_\_

Signed and sealed in the presence of:

Witness: \_\_\_\_\_

Witness: \_\_\_\_\_

\_\_\_\_\_  
(Seller)

Witness: \_\_\_\_\_

\_\_\_\_\_  
(Seller)

Witness: \_\_\_\_\_

STATE OF \_\_\_\_\_ )  
County of \_\_\_\_\_ ) SS

ON THIS \_\_\_\_\_ day of \_\_\_\_\_, AD \_\_\_\_\_, before me

Personally appeared \_\_\_\_\_

To me known and known to me to be the individual(s) described in and who  
executed the foregoing instrument, and \_\_\_\_\_ duly acknowledged to me that  
\_\_\_\_\_ executed the same for the uses and purposes therein mentioned, and who  
are personally known to me; produced \_\_\_\_\_ as  
identification.

SWORN TO AND SUBSCRIBED BEFORE ME THIS \_\_\_\_\_ DAY OF  
\_\_\_\_\_ AD.

\_\_\_\_\_  
Notary Public

My Commission Expires:

KNOW ALL MEN by these presents that \_\_\_\_\_  
Of \_\_\_\_\_

In consideration of the sum of TEN DOLLARS and other valuable considerations, as well as in consideration of the mutual covenants and other promises contained in the foregoing Assignment of Lease the receipt and sufficiency of which is hereby acknowledged, \_\_\_\_\_ hereby assume all the liabilities and obligations of the LESSEES of that certain Lease herein above referred to in the foregoing Assignment of Lease.

Witness: \_\_\_\_\_

Witness: \_\_\_\_\_  
(Buyer)

Witness: \_\_\_\_\_  
(Buyer)

Witness: \_\_\_\_\_

STATE OF \_\_\_\_\_ )  
County of \_\_\_\_\_ ) SS

ON THIS \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ AD, before me  
Personally appeared \_\_\_\_\_  
To me known and known to me to be the individual(s) described in and who  
executed the foregoing instrument, and \_\_\_\_\_ duly acknowledged to me that  
\_\_\_\_\_ executed the same for the uses and purposes therein mentioned, and who  
are personally known to me; produced \_\_\_\_\_ as  
identification.

SWORN TO AND SUBSCRIBED BEFORE ME THIS \_\_\_\_\_ DAY OF  
\_\_\_\_\_ AD.

\_\_\_\_\_  
Notary Public

My Commission Expires:

APPROVAL

This is to certify that CRANE CREST APARTMENTS, INC., HAVE APPROVED  
THE ASSIGNMENT OF THE Proprietary Lease to apartment No. \_\_\_\_\_  
And Garage Space No. \_\_\_\_\_, Carport Space No. \_\_\_\_\_, from  
\_\_\_\_\_, to \_\_\_\_\_

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, at Pompano Beach,  
Broward County, Florida.

CRANE CREST APARTMENTS, INC.

BY \_\_\_\_\_ (Seal)  
SECRETARY, Board of Directors

## Proprietary Lease

**THIS INDENTURE, made this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
by and between CRANE CREST APARTMENTS, INC., A Florida Corporation,  
herein called the Lessor, and**

**herein called the Lessee,**

**WITNESSETH: That in consideration of the covenants hereinafter provided on the  
part**

**of said Lessee to be kept and performed, the said Lessor does hereby lease to the  
said Lessee the following described property: Apartment #\_\_\_\_\_: Garage Space  
#\_\_\_\_\_**

**Carport Space #\_\_\_\_\_, in CRANE CREST APARTMENTS, INC., LOCATED at  
1850 South Ocean Blvd, (A1A), Pompano Beach, Florida; being further described as  
situate, lying and being in Broward County, Florida, and being:**

A parcel of land in Government Lot One (1), Section 7,  
Township 49 South, Range 43 East, Broward County, Florida,  
Bounded as follows: East of State Road No. A-1-A on the  
North by a line parallel to and 4350 feet southerly from,  
Measured at right angles to, the East and West Quarter-  
Section line in Section 6, of said Township and Range; on  
The South by a line 2080 feet northerly from, measured at  
Right angles to, the South line of the Northwest Quarter  
(NW1/4) of the Southeast Quarter (SE1/4) and the easterly  
Extension of said South boundary; on the West by the easterly  
Right-of-way line of State Road No. A-1-A; and on the  
East by the waters of the Atlantic Ocean: West of State  
Road No. A-1-A on the North by a line parallel to and 4350  
Feet southerly from, measured at right angles to, the East  
And West Quarter-Section line in Section 6, of said Township  
And Range; on the South by a line parallel to and 1861.75  
Feet southerly from, measured at right angles to, the North  
Boundary of said Section 7; on the West by the West line  
Of said Government Lot 1; and on the East by the westerly  
Right-of-way line of State Road No. A-1-A.

**TO HAVE AND TO HOLD THE SAME from the \_\_\_\_\_ day of \_\_\_\_\_  
\_\_\_\_\_, Until the 1<sup>st</sup> day of April, 2063, the said Lessee paying therefor the  
annual assessment against the above described apartment as shall be established by  
the Board of Directors in accordance with the By-Laws of the Lessor Corporation  
and which By-Laws and any future amendments thereto are incorporated herein  
and expressly made a part hereof as fully and to all intents and purposes as if fully  
set forth herein.**

**AND THE SAID LESSEE covenants and agrees to occupy said premises in accordance**

**With the provisions and rules and regulations as are provided in the By-Laws heretofore mentioned: and further agrees that if default is made in the payment of annual assessment or any part thereof as herein above provided or if said Lessee shall violate any of the covenants, agreements and conditions of this Lease or by the By-Laws heretofore mentioned, then the Lessee shall become a tenant at sufferance and Lessor shall be entitled to re-enter and retake possession of the above described premises as provided in said By-Laws.**

**IN WITNESS WHEREOF the Lessor has caused this instrument to be signed in its name by its president and its corporate seal to be affixed, attested by its Secretary and Lessee has hereunto set its hand and seal the day and year first above written.**

**Signed in the presence of: CRANE CREST APARTMENTS, INC.**

**Witnessed:**

\_\_\_\_\_ **BY** \_\_\_\_\_ **(SEAL)**

**Printed name:** \_\_\_\_\_ **President** \_\_\_\_\_

\_\_\_\_\_ **ATTEST:** \_\_\_\_\_ **(SEAL)**

**Printed name:** \_\_\_\_\_ **Secretary** \_\_\_\_\_

**Witnessed:**

\_\_\_\_\_

\_\_\_\_\_ **Lessee**

\_\_\_\_\_

\_\_\_\_\_ **Lessee**

STATE OF FLORIDA       )  
COUNTY OF BROWARD    )

I HEREBY CERTIFY THAT ON THIS DAY BEFORE ME, A Notary Public duly authorized in the state and county named above to take acknowledgements, personally appeared:

To be known to be the President and Secretary of CRANE CREST APARTMENTS, INC. and who executed the foregoing lease and acknowledged before me that they executed the same and affixed the corporate seal thereto in the name of and for the said corporation; that as such corporate officers, they are duly authorized to do so and that the foregoing lease is the act of said corporation, and who are personally known to me.

Witness my hand and official seal in the County and State named above, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires:

STATE OF \_\_\_\_\_ )  
COUNTY OF \_\_\_\_\_ )

I hereby certify that on this day before me Notary Public duly authorized in county and state named above to take to take acknowledgements, personally appeared;

To me known to be the persons described as Lessee in and who executed the foregoing Lease and acknowledged before me that said persons executed said lease, and who produced \_\_\_\_\_ as identification.

Witness my hand and official seal in the county and state named above, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires:



**CERTIFICATE OF APPOINTMENT OF DESIGNATED VOTER  
CRANE CREST APARTMENTS, INC.**

**THIS IS TO CERTIFY** that the undersigned members of CRANE CREST APARTMENTS, INC, constituting all the record owners of UNIT NUMBER \_\_\_\_\_, in Crane Crest Cooperative Apartments, Inc., have designated and appointed:

Name: \_\_\_\_\_  
(Must be one of the Owners of the Unit)

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

as their representative to cast any votes and to express any approvals or disapproval's that the Owners may be entitled to cast or express at any meetings of the membership of the Association and for any other purposes, pursuant to the Articles of Incorporation and the Bylaws of the Association.

This certificate is made pursuant to said Articles and Bylaws, shall revoke all prior appointments, and shall be valid until revoked by a subsequent writing.

\_\_\_\_\_  
(Print Name) (OWNER) (Print Name)

\_\_\_\_\_  
(Signature) (Signature)

**Instructions**

THIS IS NOT A PROXY. THIS CERTIFICATE OF APPOINTMENT OF DESIGNATED VOTER IS REQUIRED FOR VOTES TO BE VALIDLY CAST, ONLY IF YOUR UNIT IS OWNED BY MORE THAN ONE PERSON. To be effective, the Certificate of Appointment must be on file with the Secretary of the Association. The appointment is effective until revoked by a subsequent Certificate or by cancellation in writing. The Voting Representative named in the Certificate may vote on behalf of the Unit or may execute a Proxy naming another person to represent the Unit. The person named as designated voter must be one of the co-owners. This form when completed shall be retained in the records of the Association and is valid until superseded or canceled.

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