



Welcoming Committee Forms & Miscellaneous Information



Homeowners' Association
Instructions for Sale or Lease of Home

TO: To All Owners, Buyers, Renters and Realtors

RE: Sales or Lease Application Packages

1. Owner must submit purchase or lease agreement in writing to the Association.
2. ***City of Delray Beach Landlord/Rental Permit (City fee is \$60); Required for all Rental/Leases.***
3. All spaces on the "application for occupancy" form **must be completed**. If there are any blanks, this will hold up processing. Use "n/a" if it is not applicable. Return COMPLETE PACKAGE TO WELCOMING MEETING.
4. Coral Trace HOA Documents, Rules and Regulations booklet are being supplied to all Renters and Buyers.
5. The applicant must sign a form stating that: He/she has read and is in receipt of the HOA Documents, Rules and Regulations booklet and will adhere to all Documents, Rules and Regulations of the Association.
6. Include a ***non-refundable*** check in the amount of \$ 60.
7. Checks must be made payable to Coral Trace Homeowners' Association
8. **Attach a copy of driver's license for each applicant, for identification purposes.**
9. After the closing, the purchaser is responsible for providing the HOA with a copy of the Warranty Deed, mailing address, and phone numbers for the mailing of notices, etc.

This information should be supplied to the Management Company.

Return the completed application to:

Seacrest Services, Inc.
2400 Centrepark W. Drive, Suite 175
West Palm Beach, FL. 33409

Telephone: (561) 697-4990 and FAX (561) 697-4779

10. **YOU MUST SCHEDULE AN APPOINTMENT WITH THE WELCOMING COMMITTEE FOR A PERSONAL INTERVIEW. -- INTERVIEWS ARE SCHEDULED BY APPOINTMENT ONLY--** PHONE INTERVIEWS WILL BE CONSIDERED ON A CASE-BY-CASE BASIS FOR OUT OF TOWN PERSONS. -- PRIOR ARRANGEMENT WITH THE COMMITTEE IS REQUIRED.



Homeowners' Association

APPLICATION FOR OCCUPANCY

Coral Trace requires a NON-REFUNDABLE, \$60 Processing Fee and must be submitted at the time of application.

DATE: _____ LOT # /GATE CODE _____
ADDRESS OF PROPERTY: _____
PURCHASE: _____ OR LEASE: _____ OCCUPANCY DATE: _____

OWNER/SELLER'S NAME: _____
ADDRESS OF OWNER: _____
OWNER'S PHONE #: HOME: _____ CELL: _____
OWNERS E-MAIL: _____

PURCHASER'S/LESSEE'S NAME: _____
HOME NUMBER: _____ WORK: _____ CELL: _____
E-MAIL ADDRESS: _____
NUMBER OF ADULTS (OVER 18) OCCUPYING _____
CHILDREN (THRU 18) NAMES: _____
WILL YOU HAVE A ROOMMATE? _____ HOW MANY? _____
ROOMMATE NAME: _____ PHONE # _____
E-MAIL ADDRESS: _____
ROOMMATE NAME: _____ PHONE # _____
E-MAIL ADDRESS: _____

DO YOU OWN A PET? YES _____ NO _____ NUMBER? _____
TYPE AND WEIGHT OF PET (S) (1) _____ (2) _____
TWO (2) PETS MAX—PETS' COMBINED WEIGHT CANNOT EXCEED 60 LBS.

CITY OF DELRAY BEACH RENTAL PERMIT # (REQUIRED): _____

PURCHASER'S PERMANENT ADDRESS IF NOT ADDRESS LISTED ABOVE:

ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
HOME NUMBER: _____ WORK: _____ CELL: _____

ALTERNATE CONTACT INFORMATION (EMERGENCY USE)

NAME: _____ RELATIONSHIP: _____
HOME TEL #: _____ OFFICE TEL #: _____ OTHER #: _____
ADDRESS: _____ EMAIL: _____



REMOTE Trade – In Form

New Remote \$25 ~~ Gate Card \$10.00 fee

DATE: _____ LOT/DIRECTORY CODE: _____

OWNER'S NAME: _____

CORAL TRACE ADDRESS: _____

PHONE # _____ CELL # _____ OTHER _____

E-MAIL ADDRESS: _____

OUT OF TOWN ADDRESS: _____

OUT OF TOWN PHONE # _____ CELL _____ OTHER _____

RENTER'S NAME: _____

PHONE # _____ OTHER # _____

RENTER'S E-MAIL: _____ OWNER NOTIFIED OF PURCHASE: _____

Secura Key Gate Card Issued:

Secura Key Gate Card Returned:

- | | |
|----------|----------|
| 1. _____ | 1. _____ |
| 2. _____ | 2. _____ |
| 3. _____ | 3. _____ |
-

Gate Remotes Issued:

Gate Remotes Returned:

- | | |
|----------|----------|
| 1. _____ | 1. _____ |
| 2. _____ | 2. _____ |
| 3. _____ | 3. _____ |
-

Medeco Key: Lost: _____ **Replacement:** _____

LOT/GATE CODE # _____ **CHECK #** _____ **Total Amount \$** _____

*****Committee Member's Signature** _____ *******



Homeowners' Association

VEHICLE INFORMATION AND RECEIPT OF DOCUMENTS

NOTE: Owners and all Residents are required to register all vehicles with the HOA and display the approved registration decal.

vehicle information

1. Name: _____ Owner: _____ Lesser: _____ Roommate: _____
MAKE OF CAR: _____ MODEL: _____ YEAR: _____ LICENSE PLATE #: _____
STATE REGISTERED IN: _____ CTHOA DECAL # _____ REVD BY: _____
2. Name: _____ Owner: _____ Lesser: _____ Roommate: _____
MAKE OF CAR: _____ MODEL: _____ YEAR: _____ LICENSE PLATE #: _____
STATE REGISTERED IN: _____ CTHOA DECAL # _____ REVD BY: _____
3. Name: _____ Owner: _____ Lesser: _____ Roommate: _____
MAKE OF CAR: _____ MODEL: _____ YEAR: _____ LICENSE PLATE #: _____
STATE REGISTERED IN: _____ CTHOA DECAL # _____ REVD BY: _____

MAKE SURE YOU HAVE SUPPLIED THE FOLLOWING:

- 1. This Completed application. Put "N/A" in space if not applicable.
- 2. Non-Refundable Processing Fee of \$ 60.
- 3. CHECKS MADE PAYABLE TO CORAL TRACE HOMEOWNERS' ASSOCIATION.
- 4. A copy of the purchase or lease agreement.
- 5. A copy of the City of Delray Beach Rental Permit
- 6. Received and signed for the documents and/or the Rules and Regulations (see below).
- 7. Copy of driver licenses of each occupant.

ASSOCIATION DOCUMENTS AND/OR RULES AND REGULATIONS

I/WE, HEREBY AGREE that I/We have received, read, understand, and will adhere to all HOA Documents, rules and regulations of the HOA.

By signing below, the applicant understands that the Association or Management Company may verify the information supplied by the applicant, and a full disclosure of pertinent facts may be made to the Association.

LOT NO: _____ **ADDRESS:** _____

Signature: _____ Signature: _____



Homeowners' Association

Pet Registration Form

One Form for Each Pet

Lot/Gate Card# _____

Address _____

Name _____

Type and Breed of Pet _____

*Weight _____ **** STRICTLY ENFORCED**

Color of Pet _____

Name of Pet _____

Distinct Marking _____

Person & Number to call in case any problems occur:

*Please note: The HOA requires a letter from your veterinarian on his letterhead to verify the pet's weight and proof of current year's shots, as required by law for your pet.
Please enclose a photograph of your pet. This would be helpful should the pet get lost.

**** Pet Rules: A Total of Two (2) pets, with a total combined weight of 60 lbs.**

I am aware of and understand the Coral Trace HOA restriction for pets. All my pets are listed here and do not exceed the combined 60 lb. HOA limit.

Signature: _____ Date: _____



Homeowners' Association

WELCOMING COMMITTEE CHECKLIST

LOT #: _____ Gate Code # _____

ADDRESS: _____

OWNER(S): _____

Interview is scheduled for: Date: _____ Time: _____ Place: _____

Interviewing Committee Member(s): _____

Name of Applicant(s): _____

Name of Applicant(s): _____

____ Processing Fee (\$ 60) Received; Check # _____ **(non-refundable)**

____ Purchaser(s); _____ Lesser(s), Lease Term: from: _____ to: _____

____ Copy of City of Delray Beach Renter Permit Number: _____

____ Buyer, given copy of Doc's and Rule and Regulation Book. **(Fee included)**

____ Lesser, gets copy of Rules and Regulations. **(Fee included)**

____ Copy of purchase or lease agreement. **(Required)**

____ Name requested for gate entry system (13 characters max): _____

____ Local phone # for gate programming: _____

Completed by Property Manager

____ Computer Excel file updated: Date: _____

____ Gate Computer System updated: Date: _____

____ Copy of Completed Interview forms to Management Co. date: _____



HOMEOWNERS' ASSOCIATION

CERTIFICATE OF APPROVAL

Coral Trace HOA, Inc.
C/o Seacrest Services, Inc.
2400 Centrepark W. Drive, Suite 175
West Palm Beach, FL. 33409
(561) 697-4990 (561) 697-4779 Fax

Certifies that, said unit is being conveyed to:

Buyer Name: _____, **or**

Lessee Name: _____.

Has / have been screened and interviewed by the Coral Trace HOA, Inc. as a BUYER / LESSEE of the following described real property in Palm Beach County, Florida:

Address: _____ **Lot #** _____.

Conveyed From:

Owner/'s: _____ and / or,

Owner/'s: _____.

Such approval has been given subject to and pursuant to the Rules and Regulations of the Coral Trace HOA, Inc. and as authorized by the Coral Trace HOA Board of Directors for the Welcoming Committee Representative to execute this Certificate of Approval on behalf of the HOA.

Dated this _____ day of _____, _____.

By: _____
Welcoming Committee Representative

By: _____
Welcoming Committee Representative



How to operate the guest gate

- Your gate code is your Coupon Book account number ex. Number 1 = code 001.
- To access Owner Directory of names press and hold the “ # ” to scroll up the alphabet from “A” to “Z” (to find Owner name)
- The longer you hold the button the faster it will scroll (it will not go scroll past “Z”).
- Press “ * ” to scroll back through the alphabet from “Z” to “A” (to find owner name) the longer you hold the button the faster it will scroll (will not go past “A”).
- Once you find the name and code, enter the 3 digit code on keypad, this will dial your home phone.
- Press “ * or # ” to reset system after system starts dialing (if you entered something incorrect), or you want to hang up and try again.
- The directory will not roll over from “Z” to “A” with the “ * ” button or from “A” to “Z” with the “ # ” button (scrolling from “A” to “Z” takes 15 sec) and will not go past “Z”.
- If you enter the wrong code 3 times the system will reset this takes “60 seconds”

Quick Guest entry when they know the “three digit” code

- Guest drives up to gate entry box.
- They press “#” wait a few seconds, this wakes up the system.
- Then they enter your home code, ex. 412 (Clubhouse code), system calls your home, When you answer the phone, they say “HI! I’m Joe Smith A/C here to fix the Air Conditioner” you press “9” to let them into the community, when the Guest gate opens and they enter the community.

INSTRUCTIONS FOR TELEPHONE SYSTEM

Each resident has been assigned a “three digit” code number that appears with the resident name. A visitor simply scrolls to your name and enters your code number into the keypad. Please give your guest the “three digit” code number and remind them to press the hang-up button/icon BEFORE entering your code.

The telephone system uses your 7 digit phone #. When it rings and a visitor advises you that they are at the front gate, to open gate, push “ 9 ” on your telephone. You should here “Please Enter” if not Press “ 9 ” again and the gate should open (the connection remains open for 30 seconds). The connection will terminate automatically after 30 seconds or when you hang up the phone.

It is very important that your phone is **only** in the “TONE” setting. It is the “tone” signal that will open the gate. Any other setting **will not work!**

If you are on the telephone when the visitor attempts to call you, a busy signal will sound, unless you have call waiting. It is recommended that you subscribe to call waiting. A call from the front gate will show Coral Trace on the caller ID.

****To open gate from your home press the “ 9 ” on your phone****

ALARM ORDINANCE
City of Delray Beach
100 NW 1st Avenue
Delray Beach, Florida 33444

The Alarm Systems Ordinance #1-95 was passed on January 17, 1995 as a result of the high incidence of false alarms and/or malfunctions. The alarms were creating a significant drain on the manpower and resources of the Police and Fire Departments by rendering units out of service and unavailable to respond to legitimate emergency situations.

Residential security alarm users must register their system with the City of Delray Beach by submitting a completed Alarm Application to Occupational Licensing. **See enclosed form on the next page.**

Alarm registration decals are issued at no charge unless you receive a notice of violation due to the emission of a false alarm. A registration fee of \$10.00 will be charged if the application to register is made within ten (10) days of the violation notice. The alarm user will be subject to a \$50.00 late charge after ten days.

Alarm users are required to display their registration decal in an area that is visible from the outside to Police and/or Fire Department Officials (preferably the window closest to the front door).

There is no charge for the first three (3) false and/or malfunction alarms during a calendar year. The fourth (4) and additional false alarms will be charged \$25.00 each.

All registration information is to be kept current and up to date. Any changes are required to be reported to the Delray Beach Police Department in writing or at (561) 243-7836.

Call (561) 243-7209 for Alarm Registration Information.

****Information compiled from: <http://mydelraybeach.com/Delray/Departments/Community+Improvement/For+Residents/Alarm+Registration.htm> and the City of Delray Beach Alarm Ordinance, General Information Form**

APPLICATION FOR ALARM REGISTRATION PERMIT DECAL # _____

CITY OF DELRAY BEACH

100 N.W. 1st Avenue, Delray Beach, FL 33444
(561) 243-7209

APPLICANT'S PROPERTY TO BE SERVICED BY ALARM:

Name: _____
Address _____ Suite/Apt/Bay _____
City: _____ Zip _____ Telephone # _____

MAILING ADDRESS, IF DIFFERENT FROM ABOVE:

Name: _____
Address: _____ Suite/Apt/Bay _____
City: _____ Zip _____ Telephone # _____

CHECK TYPE OF ALARM:

1. _____ Burglar
_____ Fire
2. _____ Residential Alarm
_____ Commercial Alarm

ALARM BUSINESS MAINTAINING THE ALARM – If None, Indicate as “N/A”

Name: _____
Address: _____ Suite/Apt/Bay _____
City: _____ Zip _____ Telephone # _____

LIST 3 PERSONS OR ENTITIES TO BE CONTACTED IF FALSE ALARM OCCURS.

List those people who have access to premises in the order that you want them contacted:

1. Name: _____
Address: _____ City _____ Zip _____
Telephone #1 _____ #2 _____ #3 _____

2. Name: _____
Address: _____ City _____ Zip _____
Telephone #1 _____ #2 _____ #3 _____

3. Name: _____
Address: _____ City _____ Zip _____
Telephone #1 _____ #2 _____ #3 _____

ALARM USER'S SIGNATURE _____

PRINT NAME _____ DATE _____



Homeowners' Association – Helpful Contact Numbers

Florida Power & Light

- Emergency 561-994-8227
- New Service, Customer Service, Emergency 561-697-8000
- Connections made Monday – Friday 7:00 am to 7:00 pm
- Application Processing fees may apply
- Deposit, per credit history with FP&L up to \$250.00
- Billed immediately – ten (10) days to pay

Bell South/ATT

- New Service – initiated by telephone 1-888-757-6500
- Seven (7) days a week – 7:00 am to 10:00 pm
- Repair twenty-four (24) hour service 611

Comcast

- 1595 SW 4th Ave, Delray Beach, Fl. 33444 561-272-2522
- Twenty-four (24) hours a day seven (7) days a week
- Emergency service within twenty-four (24) hours 561-930-2225

Devcon Security 800-792-4325

- 141 NW 20 Street, Suite G1, Boca Raton, Fl 33431
- Service between 8 am – 5 pm Monday through Friday 800-792-4325
- Customer Service 8am - 5 pm Monday through Friday 800-537-6426
- Central Alarm Station - 24 hours a day 7 days a week 800-226-2351

City of Delray Beach 561-243-7100

- Emergency Service – before 5 pm 561-243-7100, after 5 pm 561-243-7800
- Code Enforcement 561-243-7219, Trash Removal 561-243-7212
- Water & Sewer Service 561-243-7100
- Trash removal service commences with water service
- Trash pick-up twice a week – Tuesday (Bulk trash & yard debris)
Friday (Recycling pick-up)

Gate System

- Please refer to your most recent newsletter for Welcome Committee contact name(s) and phone number(s) for the following: Your name and phone number added or changed in the Guest Gate Directory
- Buying Gate cards or Remotes used for the entry gate and the Clubhouse. (Limit 5 devices per household.), Recreation Key (used for entry to Social Room, Exercise Room, Card Room, Billiard Room & Tennis Court.

Management Company – Seacrest Services, Inc., 2400 Centre Park West Drive, Suite 175, West Palm Beach, FL 33409

Mailbox Company – (Only approved Mailbox replacement)
The Mail Box Company 954-792-6245

Community Newsletter, distributed monthly. You will find most telephone numbers for our Community, such as Clubhouse Social Room rental contact, HOA Board Members, and Chairpersons of the various committees.

Community Website: <http://www.coraltracehoa.com/>

**City of Delray Beach
Community Improvement
100 NW 1st Avenue
Delray Beach, Fl 33444
(561) 243-7243**

INSTRUCTIONS FOR APPLICATION AND AFFIDAVIT FOR LANDLORD PERMIT - RESIDENTIAL PROPERTY

1. Please complete all applicable information on the Application for Landlord Permit and the Landlord Permit Affidavit. The Property Control Number (17 digit number) can be obtained from your property tax bill.

Note: Please complete the Permit Application for each rental unit. Attach additional sheets as necessary. A Landlord Permit is **NOT** required for a hotel, for any unit enrolled in a federal housing program, or under Housing and Urban Development general supervision.

2. A Landlord Permit Affidavit must be notarized and submitted with each application. A permit cannot be issued without the affidavit. Be sure to read the information on the reverse side of the affidavit. (A Notary Public is available in the Code Enforcement Division.)

3. Landlord Permits are issued for the 12-month period of **November 1, 2009** through **October 31, 2010** at a fee of **\$60.00 per rental unit**. Please do not send cash. Checks must be made payable to the City of Delray Beach. **Landlord Permits not renewed within 60 days of the annual renewal date will be subject to triple permit fees.**

4. Please return your completed application, notarized affidavit, supplemental sheets (if any), and payment to Landlord Permit Section, Code Enforcement Division, City of Delray Beach, 100 NW 1st Avenue, Delray Beach, Florida 33444.

If you have any questions or need further information, please call the Code Enforcement Division at (561) 243-7243, 8:00 AM to 5:00 PM, Monday through Friday.



Landlord Permit # _____

CITY OF DELRAY BEACH APPLICATION FOR LANDLORD PERMIT

IF YOU HAVE MORE THAN ONE RENTAL UNIT AND IF YOU RECEIVE A SEPARATE PROPERTY TAX BILL FOR EACH UNIT, YOU **MUST** COMPLETE A SEPARATE APPLICATION FOR EACH UNIT.

PLEASE PRINT:

Property

Control No. _____ - _____ - _____ - _____ - _____ - _____ - _____

Rental Address _____

Property Owner _____ Phone _____

Mailing Address _____

City _____ State _____ Zip _____

Type of Building _____ Single Family Are you under the HUD Program?

_____ Duplex Yes _____ No _____

_____ Multi Family

TOTAL NUMBER OF UNITS IN BUILDING _____ NUMBER OF RENTAL UNITS FOR THIS PERMIT _____

PLEASE COMPLETE THIS RENTAL INFORMATION:

Unit No. _____ No. of Bedrooms _____ Total No. of Occupants _____

Unit No. _____ No. of Bedrooms _____ Total No. of Occupants _____

Unit No. _____ No. of Bedrooms _____ Total No. of Occupants _____

Unit No. _____ No. of Bedrooms _____ Total No. of Occupants _____

Unit No. _____ No. of Bedrooms _____ Total No. of Occupants _____

A notarized Landlord Permit Affidavit (attached) **MUST** accompany this application before a permit will be issued.

Signature of Owner or Authorized Agent

DO NOT WRITE BELOW THIS LINE

--

DATE: _____ AMOUNT PAID: _____

**LANDLORD PERMIT AFFIDAVIT
RESIDENTIAL PROPERTY**

I, _____, being duly sworn affirm that I am authorized to apply for a landlord permit for the following residential unit(s) located at

_____ because I am the actual owner of the unit(s) or because I have the legal authority to represent the actual owner of the unit(s).

I have read and understand the requirements of Sections [302.1, 302.3, 302.5.1, 302.6, 302.7, 302.9 and 305.4 of the Standard Housing Code,] as printed on the reverse side of this document, and affirm that the above described residential unit(s) complies with those requirements. I further affirm that the above residential unit(s) is in sound structural condition, has electrical service and that all electrical devices are properly installed and in good working order. I also affirm that every habitable room has at least one window or skylight facing directly to the outdoors and that all windows are capable of being easily opened and secured in position by existing window hardware and have screens (if there is no central a/c) and unbroken glazing.

I will inform the City of Delray Beach Code Enforcement Division of any changes from the original Application for Landlord Permit and supplemental sheets (if utilized) concerning ownership, owner's mailing address for permits and renewals, number of unit(s), number of units under Federal programs or HUD supervision, number of bedrooms or number of occupants in each unit. I affirm that the individual unit(s) described above will only be rented to occupants whose relationship does not violate the City's definition of family, which definition is printed on the reverse side of the Instructions for Landlord Permit Application and which I acknowledge as reading and understanding.

Owner or Authorized Agent: _____

(Signature)

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____,

by _____ who is personally known to me or who has produced
(NAME)

_____ as identification and who did take an oath.

(TYPE OF ID)

Signature

Type, Print or Stamp Name

Title

Serial Number

The following definition from the City ordinances is included for your information, specifying 3 as the maximum # of adults that are allowed to reside together in one of our units.

FAMILY DEFINITION:

“Family” shall mean two (2) or more persons living together and interrelated by bonds of consanguinity, marriage or legal adoption, and/or a group of persons not more than three (3) in number who are not so interrelated, occupying the whole or part of a dwelling as a separate housekeeping unit with a single set of culinary facilities. Any person under the age of 18 years whose legal custody has been awarded to the State Department of Health and Rehabilitative Services or to a child-placing agency licensed by the Department, or who is otherwise considered to be a foster child under the laws of the state, and who is placed in foster care with a family, shall be deemed to be related to and a member of the family for the purposes of this definition. Occupancies in excess of the number allowed herein shall have twelve (12) months from the date of the enactment of this definition or the termination of the current lease agreement to come into compliance, whichever occurs first.