

Xanadu by the Sea

PROPERTY OWNERS ASSOCIATION



AUTHORIZATION TO RELEASE CREDIT, RESIDENCE, BANKING AND EMPLOYMENT INFORMATION

As a consideration for residency, a nationwide law enforcement background investigation is required to complete the approval process with Jupiter Management, LLC. on behalf of Xanadu by the Sea POA. Please complete this form and provide copies of legal identification for all residents to occupy said residence over the age of 18 (eighteen).

Sarama

I/We understand an investigation may be conducted to determine my character, general reputation, and my personal characteristics. A consumer credit report, driving history report and criminal history report may be pulled. I/We specifically authorize Sarama to conduct this background investigation.

I/We release Sarama, its employees and members from any loss, expense, or damage which may result directly or indirectly from information or reports furnished by Sarama.

Applicant Name _____

(Please Print)

Date of Birth _____ SSN _____

Street Address _____

City/State/County/Zip _____

Applicant Signature _____ Date _____

You are authorized to release to Sarama/United Screen Services Corporation any information requested regarding my banking, credit, employment, and residence.

I waive all rights and privileges concerning the release of said information and reports to Sarama.

Signed _____ Date _____

Please print your last name _____

Applicant Name _____

(Please Print)

Date of Birth _____ SSN _____

Street Address _____

City/State/County/Zip _____

Applicant Signature _____ Date _____

You are authorized to release to Sarama/United Screen Services Corporation any information requested regarding my banking, credit, employment, and residence.

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Please print your last name _____

Applicant Name _____

(Please Print)

Date of Birth _____ SSN _____

Street Address _____

City/State/County/Zip _____

Applicant Signature _____ Date _____

You are authorized to release to Sarama/United Screening Services Corporation any information requested regarding my banking, credit, employment, and residence.

I waive all rights and privileges concerning the release of said information and reports to Sarama.

Signed _____ Date _____

Please print your last name _____

Please send all required documentation to complete the approval process to:

Jupiter Management, LLC.

c/o: Property Manager for Xanadu by the Sea POA

1340 US Highway 1, Suite 102

Jupiter, Florida 33496

Check in the amount of \$150.00 made payable to Jupiter Management, LLC. to obtain background information must be mailed with this authorization for final approval.

Manager: (Office Use Only)

Approved _____ Denied _____ Date _____



1340 U.S. Highway One, Suite 102, Jupiter, FL 33469
(561) 743-4607 Fax (561) 743-4625

C/O Jupiter Management, 1340 US Highway One, Jupiter, FL 33469
Phone 561-743-4607 Fax 561-743-4625 Email candace@jupitermgt.com