



*ALMERIA PARK CONDOMINIUM ASSOCIATION, INC.*  
357 Almeria Avenue Coral Gables, FL 33134

# *Application for Purchase*

Applicant Name# 1: \_\_\_\_\_

357 Almeria Ave Unit: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Applicant Name# 2: \_\_\_\_\_

357 Almeria Ave Unit: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Applications along with the below requested information deliver to:  
Management Office 357 Almeria Ave Suite I00 Coral Gables , FL 33134



**ALMERIA PARK CONDOMINIUM ASSOCIATION, INC.**  
357 Almeria Avenue Coral Gables, FL 33134

## Resident Orientation Checklist

UNIT#       

Received On/By:        \_\_\_\_\_  
Reviewed On/By:        \_\_\_\_\_

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\*For Office Use Only\*

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### ITEMS

1. Association application	_____
2. Copy of Contract for Sale	_____
3. Application Fees	_____
4. Picture ID for all prospective tenant(s)	_____
5. United screening application (attached) completed.	_____
6. Building Security Deposit (equal to a month rent)	_____
7. Leasing Guidelines	_____
8. Contact information form	_____
9. Mailing Address Notification	_____
10. Vehicle & Motorcycle /Bicycle registration	_____
11. Emergency Contact & Assistance Survey	_____
12. Pet agreement	_____
13. Package Receipt Authorization	_____
14. Access Authorization	_____
15. Affidavit Of Resident	_____
16. Association Rules and Regulations	_____

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**1 -All Money Orders and Cashier Checks must be payable to:**

**Almeria Park Condominium Association, Inc.**



**ALMERIA PARK CONDOMINIUM ASSOCIATION, INC.**  
**357 Almeria Avenue Coral Gables, FL 33134**

UNIT# \_\_\_\_\_ APPLICANT FULL NAME: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ CLOSING DATE: \_\_\_\_\_

SALES \_\_\_\_\_ MOVE IN: \_\_\_\_\_

**THIS APPLICATION HAS BEEN APPROVED BY: \_\_\_\_\_ THIS**  
**— DAY — 200—.**

**ALMERIA PARK CONDOMINIUM ASSOCIATION**  
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**1. Summary and Information forms**

- Sale guidelines
- Contact information form
- Mailing address notification
- Vehicle registration
- Bicycle & motorcycle registration
- Emergency contact
- Emergency assistance survey
- Pet registration
- Pct acquisition agreement
- Package receipt authorization
- Access authorization
- Affidavit of resident
- Rules & regulation s

**2. Move-In Information**

- Delivery &/or move in - move out request.

**3. Hurricane Preparedness**

**4. Before you hit the ceiling**

**5. 10 tips for fire safety**



**ALMERIA PARK CONDOMINIUM ASSOCIATION, INC.**  
**357 Almeria Avenue Coral Gables, FL 33134**

**APPLICATION FOR PURCHASE**

Please complete the attached application. (\*see management office for application form\*). Do not leave any spaces blank. All applications must have a copy of your purchase contract attached. Return this completed application to Almeria Park Condominium Association Management office. Checks in the amount of \$150 per applicant over 18 years old, married couple \$ 150.00 Marriage Certificate is required. Foreign nationals will be charged a fee of \$250.00 Money Orders or Cashier Check are payable to Almeria Park Condominium Association, Inc.

**APPLICATIONS WILL ONLY BE REVIEW BY THE BOARD FOR APPROVAL  
ON THE 1<sup>st</sup> AND 15<sup>th</sup> OF THE MONTH.**

It is your responsibility to submit the recorded Deed within thirty 30 days of the closing. This is a requirement of the Association's Governing Condominium Documents. A copy of the closing statement is required immediately after closing date.

It is the responsibility of the seller to turn over all Condominium Documents and keys, include gate access cards, to the purchaser at the time of closing. If the seller does not turn these items over to the purchaser, they may be obtained through the Condominium Office at the current price.

As noted on the association documents, your monthly maintenance assessment for your unit should be remitted on/or before the first day of each month. Please keep in mind that all payment received after the 10<sup>th</sup> of each month will be considerate late. If your payment is considerate late a late fee of \$ 25.00 will be assessed. Make all checks payable to Almeria Park Condominium Association, Inc. Please include your unit number on the check. Mail it to the Management Company at the following address:

**Almeria Park Condominium Association, Inc. 357 Almeria Ave Unit 100 Coral Gables  
FL, 33134**



**ALMERIA PARK CONDOMINIUM ASSOCIATION, INC.**  
**357 Almeria Avenue Coral Gables, FL 33134**

The Monthly maintenance assessment for you unit is \$ \_\_\_\_\_

Each month a statement is automatically generated for all outstanding balances.

Any questions concerning payments should be directed to the Almeria Park Condominium Management Office at 305-444-6023.

Any changes to the exterior and interior of the unit must be approved by the Association prior to starting any work. **There is an ARCHITECTURAL MODIFICATION OR ALTERATION form with a fee of \$75.00** All requests should be mailed or submitted to the Management Office at the following address: **Almeria Park Condominium Association, Inc., 357 Almeria Avenue, Coral Gables, Florida 33134. Tel: 305-444-6023.**

Once you have been screened and approved, you may contact the Management Office at (305) 444-6023 and schedule your move-in date. All movers require 5 days advance reservation and a refundable \$100.00 security deposit.

Under no circumstances may applicant(s) be given access cards, unit keys, or be authorized to move in, before the approval of the Board of Directors.

**An owner may NOT, under any circumstances, sublet the unit (or any portion thereof) to any other person or permit occupancy by any other person.**

I/we the undersigned prospective owner(s) hereby acknowledge that I/ we have read, reviewed, and understood the aforementioned items, and agree to abide by them.

Signature and Print Name/Date



**ALMERIA PARK CONDOMINIUM ASSOCIATION, INC.**  
357 Almeria Avenue Coral Gables, FL 33134

**CONTACT INFORMATION FORM**

Unit Owner: \_\_\_\_\_ Unit No. \_\_\_\_\_

Please list all residents living in the unit.

1 Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Phone/Cell # \_\_\_\_\_

Work # \_\_\_\_\_ Fax \_\_\_\_\_ Email: \_\_\_\_\_

~~Name~~: \_\_\_\_\_ Last Name: \_\_\_\_\_ Phone/Cell # \_\_\_\_\_

Work # \_\_\_\_\_ Fax \_\_\_\_\_ Email: \_\_\_\_\_

~~Name~~: \_\_\_\_\_ Last Name: \_\_\_\_\_ Phone/Cell # \_\_\_\_\_

Work # \_\_\_\_\_ Fax \_\_\_\_\_ Email: \_\_\_\_\_

~~Name~~: \_\_\_\_\_ Last Name: \_\_\_\_\_ Phone/Cell # \_\_\_\_\_

Work # \_\_\_\_\_ Fax \_\_\_\_\_ Email: \_\_\_\_\_

~~Name~~: \_\_\_\_\_ Last Name: \_\_\_\_\_ Phone/Cell # \_\_\_\_\_

Work # \_\_\_\_\_ Fax \_\_\_\_\_ Email: \_\_\_\_\_



**ALMERIA PARK CONDOMINIUM ASSOCIATION, INC.**  
**357 Almeria Avenue Coral Gables, FL 33134**

**MAILING ADDRESS NOTIFICATION**

Property Address: **357 ALMERIA AVENUE**  
**UNIT# \_\_**  
**CORAL GABLES, FLORIDA 33134**

**PLEASE MAIL ALL CORRESPONDENCE RELATING TO THE ABOVE**  
**PROPERTY TO:**

The above property address.

The following address

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

If **Almeria Park Condominium Association** is not to be considered as your primary residences, please indicate the dates between which you expect to reside here.

From: \_\_\_\_\_ To: \_\_\_\_\_



**ALMERIA PARK CONDOMINIUM ASSOCIATION, INC.**  
*357 Almeria Avenue Coral Gables, FL 33134*

**VEHICLE REGISTRATION FORM**

**RESIDENT'S NAME(s):** \_\_\_\_\_ **UNIT#:** \_\_\_\_\_

Vehicle #1 (Vehicle owner's name) \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_

# \_\_\_\_\_ State: \_\_\_\_\_ Parking Space# \_\_\_\_\_ Decal# \_\_\_\_\_

Vehicle #2 (Vehicle owner's name) \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_

Tag# \_\_\_\_\_ State: \_\_\_\_\_ Parking Space# \_\_\_\_\_ Decal# \_\_\_\_\_

Resident's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Resident's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**MOTORCYCLE OR BICYCLE REGISTRATION FORM**

Bicycle #1 (Bicycle owner's name) \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ Serial # \_\_\_\_\_

Bicycle #2 (Bicycle owner's name) \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ Serial # \_\_\_\_\_



**ALMERIA PARK CONDOMINIUM ASSOCIATION, INC.**  
**357 Almeria Avenue Coral Gables, FL 33134**

Resident's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Resident's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**EMERGENCY CONTACT**

Unit: \_\_\_

Resident's Name(s): \_\_\_\_\_

Resident's Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

In the event of an emergency, Management will attempt to contact the resident(s) noted above. However, if Management is unable to reach the resident(s), Management will make an effort to contact the following individual(s):

Emergency Contact Name: \_\_\_\_\_ Phone # \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone # \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone # \_\_\_\_\_

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



**ALMERIA PARK CONDOMINIUM ASSOCIATION, INC.**  
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**EMERGENCY ASSISTANCE SURVEY**

**Please help us update our emergency assistance records by completing the questions below. The emergency assistance record is a compilation of all residents requiring special assistance and including resident information on special need for assistance. Please communicate the arrangements made for care, and specifics of these arrangements below. This information might be helpful for fire or EMT personnel, should they request it while on property for an emergency call.**

Name: \_\_\_\_\_ Unit: \_\_\_\_\_ Telephone: \_\_\_\_\_

**DO YOU HAVE A DISABILITY THAT WOULD PREVENT YOU FROM EXITING THE BUILDING UNASSISTED SHOULD THE ELEVATORS NOT BE AVAILABLE?**

Would you be able to walk down the fire exit stairwell if the elevators were not available?

YES       NO

Are you wheel chair bound?

YES       NO

If yes, please describe the nature of this disability: \_\_\_\_\_

**IN CASE OF EMERGENCY, LIST THE FOLLOWING CONTACTS:**

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Relative Contact Information

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Physician Contact Information

What special arrangements have you made to receive assistance in case of an emergency?



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**PET REGISTRATION FORM**

Resident's Name (s): \_\_\_\_\_ Unit #: \_\_\_\_\_

**Unit owner will provide Management with photograph, pet to complete the pet registration process. Pet cannot be over 45 pounds in weight. Pets must always be kept on a leash. Not a pit bull or other breed considered to be dangerous. Please complete one form per animal.**

Type of Pet (please circle one):       DOG     CAT     OTHER (please specify) \_\_\_\_\_

Pet's Name: \_\_\_\_\_ **Pet** Age: \_\_\_\_\_

Pet's Sex: \_\_\_\_\_ Pet's Weight: \_\_\_\_\_

Pet's License/Tag Number: \_\_\_\_\_ Color of Pet: \_\_\_\_\_

Breed (*Be specific - give complete description, color, etc.*): \_\_\_\_\_

Picture:

Insert jpeg or staple Polaroid here.



**ALMERIA PARK CONDOMINIUM ASSOCIATION, INC.**  
**357 Almeria Avenue Coral Gables, FL 33134**

Unit-Owner's Signature \_\_\_\_\_ Date: \_\_\_

**PET ACQUISITION AGREEMENT**

I, \_\_\_\_\_ as OWNER/RENTER of unit  
#\_\_\_\_\_ certify that I do not have any pets living in the specified unit.

I agree and understand that if in the future I would like to bring a pet to live in my unit I must:

1<sup>st</sup> : Comply with the Condominium Rules & Regulations as pertaining to \_\_\_\_\_ pets.

2<sup>n</sup> : Provide AKC or other kennel information regarding the weight of the pet.

3<sup>rd</sup> : Register the pet at Almeria Park Condominium Association office by filling out the appropriate forms and provide the required documentation.

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**Signature**

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**Print Name**

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**Date**



**ALMERIA PARK CONDOMINIUM ASSOCIATION, INC.**  
**357 Almeria Avenue Coral Gables, FL 33134**

**PACKAGE RECEIPT AUTHORIZATION**

THE UNDERSIGNED, owner(s) 0 / tenant(s) 0 of Unit # \_\_\_\_\_ **Almeria Park Condominium**, hereby authorize(s) the Condominium Association's front desk personnel to accept, receive and sign for any parcels or mail addressed to the Unit, without imposing any liability thereon for the condition or substance of any such parcels so received.

Understanding that this authorization is solely for the benefit of the undersigned, I/we hereby release the Condominium Association, its employees, agents and assigns, from any liability arising from this authorization, including, without limitation, liability arising from its employees, agents and assigns, in such regard.

Executed on \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

By: \_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature



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**357 Almeria Avenue Coral Gables, FL 33134**

## **ACCESS AUTHORIZATION**

It is standard procedure for the front desk to contact residents prior to granting their visitor(s) access in to the premises, except if the visitor has been previously authorized (in writing) by the resident. Otherwise, if the front desk is unable to obtain verbal authorization from the resident, the visitor will be turned away.

Therefore, if an owner/tenant wishes to authorize access to their unit during an absence from the property, this form must be used to designate such authorization. Access will be permitted to all parties listed below.

It is the sole responsibility of the owner/tenant to make all arrangements for their guest(s) to have access to their unit; the resident must provide unit keys for the authorized party. **Management will not be responsible to provide the below named visitor keys under any circumstances.**

Further, I agree that I am fully responsible for my guests' actions while at **Almeria Park Condominium** and have explained to my guests' that they must abide by all governing documents including Declaration of Condominium , Articles of Incorporation , By-Laws, and Rules and Regulation

**Name** \_\_\_\_\_ **Unit #** \_\_\_\_\_

**Hereby authorize access for the following person(s):**

CALL UNIT BEFORE GRANTING ACCESS	DO NOT CALL UNIT	NAME	REASON FOR AUTHORIZATION
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		



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Resident's Signature

Date

**AFFIDAVIT OF RESIDENT**

I/We hereby agree for myself and on behalf of all persons who may use the unit which I/We seek to purchase or lease at Almeria Park Condominium, that I/We will comply with the By-Laws, Rules and Regulations or restrictions which are in affect now or which may, in the future, be imposed by the Board of Directors.

I/WE have received a copy of all Condominium Documents

Yes \_ \_ No \_ \_

I/We have received a copy of all Rules and Regulations

Yes \_ \_ No \_\_\_\_\_

IN WITNESS WHEREOF, I/WE have executed the foregoing application on this \_ \_ \_ \_ \_ day of \_\_\_\_\_, 20\_ .

WITNESS  
RESIDENTS SIGNATURE

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PRINT NAME  
Signature of Buyer or Renter



**ALMERIA PARK CONDOMINIUM ASSOCIATION, INC.**  
*357 Almeria Avenue Coral Gables, FL 33134*

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Signature of current unit owner

**Rules & Regulations Acknowledgment**

I \_\_\_\_\_ have received read and  
understand all the rules and regulations for Almeria Park  
Condominium.

**Date of the interview:** \_\_\_\_\_

Thank you in advance for your anticipated compliance and cooperation.

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Applicant Signature

Date



**ALMERIA PARK CONDOMINIUM ASSOCIATION, INC.**  
**357 Almeria Avenue Coral Gables, FL 33134**

**DELIVERIES/MOVE INS AND OUTS REQUEST FORM**

Resident' Name(s): \_\_\_\_\_ Unit # \_\_\_\_\_

Move-in/ Move-Out Requested move date: \_\_\_\_\_

\$100 Refundable Security Deposit, received by / date: \_\_\_\_\_

**READ CAREFULLY**

If the resident causes any damages to any part of the property during a move, or if any of said resident's guest/movers/contractors causes said damage, that resident is responsible for the full cost to repair those damages and will be billed by the Association accordingly. **A contractor Access Request Form must be completed for any moving contractors, and all required documentation must be provided before moving contractors will be allowed on property (see enclosed).**

**A refundable security deposit of \$100.00 is required to secure a reservation for a moving date.** This deposit will be deposited by the Association, and returned within 10 days after the move , provided no damage has occurred. Any rescheduling must coincide with an available date on the Association receiving area reservation calendar. **All moves must be scheduled no less than 14 days in advance, and must take place during the following hours:**

**Monday through Friday- 8:00 a.m. until 4:00 p.m.**

**Saturday, Sunday, or Holidays - Moving is not permitted**

**Please provide Management with a "Certificate of Liability" of the selected company being used for move/in, move/out or delivery naming Almeria Park Condominium as the Certificate Holder.**

All deliveries and moving vehicles must park in the designated receiving area. Truck, moving vans or other oversized vehicles 15 feet or higher will not be able to unload at the receiving/docking area. Notify your deliverers and movers to use an appropriately size vehicle.

No items may be stored or left in the receiving area.



**ALMERIA PARK CONDOMINIUM ASSOCIATION, INC.**  
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Residents or residents' agent must be at home to accept deliveries of furniture and packages.

Residents must take full responsibility for the delivery of large items; Security will not supervise delivery of furniture.

Oversized items that will not fit in the elevator will need to be scheduled for transport through Otis Elevator Company (see Management Office).

No overnight storage permitted.

Removal of all packaging materials , boxes, and other thrash is the resident 's responsibility. Movers MUST remove all such materials from premises. Under no circumstances may any of these materials be placed in the building trash chutes or left in a common areas such as a hallway garage. If any of my moving materials are disposed of improperly, the Association will bill me for the cost of removing said materials.

I here agree to indemnify and hold harmless Almeria Park Condominium and its employees or agents for any claim against the Association arising from any situation in connection with this authorization.

**I HAVE READ, AND FULLY UNDERSTAND AND AGREE TO THE ABOVE.**

Resident Signature /Date:

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Resident Signature/Date:

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**ALMERIA PARK CONDOMINIUM ASSOCIATION, INC.**  
**357 Almeria Avenue Coral Gables, FL 33134**

## **HURRICANE PREPAREDNESS**

Hurricane season begins June 1<sup>st</sup> and continues through the month of November. Before the season begins , it is important that you take time to review your storm plan with your family to ensure that you will be prepared in the event of an approaching storm. **The Miami Herald, Sun Sentinel and Publix Supermarkets** publish excellent guidelines and supply information so that you can be ready.

As you know, there will be no basic services during or immediately after a hurricane (i.e. police, medical or fire). All personnel and residents must evacuate in the event of an evacuation order. Thus, if you elect to remain in your home, you will be on your own. You should make arrangements to go to a safe place during the storm. After you have made plans , please advise the management office in writing where you will be and how you may be reached. **PERSONS WITH SPECIAL NEEDS SHOULD REGISTER WITH THE COUNTY OFFICE OF EMERGENCY MANAGEMENT FOR ASSISTANCE AT 305-513-7700.**

The association has limited ability to protect against initial damages. All homeowners and residents **must** remove potentially dangerous loose article s from balconies and patios. You **must** secure your own windows and doors. With limited staff member s (who also need to protect their respective families and homes), time does not permit the association to make preparation s for residents, and most of the efforts wi11 be concentrated on common areas.

If you have storm shutters, you should check them for proper operation. If you do not have homeowner's insurance, you may want to purchase it now. Unit owners and occupants shall be responsible for removing their vehicles and other property from the parking areas upon the issuance of a tropical storm or hurricane warning. If you are leaving your home before or during hurricane season, you should make arrangements to remove everything from your balcony and designate a firm or an individual to be responsible for the care of your unit in the event of a hurricane.

Please advise the management office in writing of any emergency contacts.

Thank you for your complete attention to this important matter. **Having a plan in place will help protect you and your property.**



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**357 Almeria Avenue Coral Gables, FL 33134**

**"BEFORE YOU HIT THE CEILING"**

**Have you ever seen a warning for underground lines from BellSouth or a natural gas company?**

It is important to call the Association office before you drill into the ceiling or floor of your unit. From time to time, we receive inquiries about ceiling fan replacement s or securing items into the floor. The rule of thumb, when considering such activities, is maximum 5/8-inch penetration (after Architectural Committee approval). Adherence to this guideline prevents damage to the post tension support cables in the slab. This penetration must be limited to anchor use only. Channeling through the floor or ceiling is strictly prohibited.

**Why is this precaution so important?**

The building is supported with an intricate pattern of steel cables imbedded in the concrete slab. This provides the structural strength of the building. After the concrete has set, the cables are pulled outward, adding stress. The cables are then anchored at the edges of the slab. This is called "post tension". Drilling into the slab may pierce a cable, which may be linked to cutting a taut rubber band with a knife. The cable may break with great force and intensity. In some cases, the concrete has given way under the broken cable, causing personal injury and property damage. Repairs are very costly and inconvenient.

**Sound proofing**

The association requires sound proofing to be installed prior installation of floor system. Contractor shall submit Rules & Sound proof forms to management. Contractor shall receive approval prior commencement of any work.

Please contact the Management Office before drilling into the floor or ceiling and installation of flooring.



**ALMERIA PARK CONDOMINIUM ASSOCIATION, INC.**  
**357 Almeria Avenue Coral Gables, FL 33134**

**10 TIPS FOR FIRE SAFETY**

1. Install smoke detectors - smoke detectors can alert you to a fire in your home in time for you to escape, even if you are sleeping. Test detectors every month, following the manufacturer's directions, and replace batteries once a year, or whenever a detector "chirps" to signal low battery power. Never "borrow" a smoke detector's battery for another use - a disabled detector can not save your life. Replace detectors that are more than 10 years old.
2. Plan your escape from fire - if a fire breaks out in your home, you have to get out fast. To prepare, sit down with your family and agree on an escape plan. Be sure everyone knows at least two unobstructed exits - doors and windows - from every room (if you live in an apartment building, do not include elevators in your escape plan). Decide on a meeting place outside where everyone will meet after they escape. Have your entire household practice your escape plan at least twice a year.
3. Keep an eye on smokers - careless smoking is the leading cause of fire deaths in North America. Never smoke in bed or when you are drowsy. Provide smokers with large, deep, non-tip ashtrays and soak butts with water before discarding them. Before going to bed or leaving home after someone has been smoking, check under and around cushions and upholstered furniture for smoldering cigarettes.
4. Cook carefully - never leave cooking unattended. Keep cooking areas clear of combustibles and wear clothes with short or tight-fitting sleeves when you cook. Turn pot handles inward on the stove where you can not bump them and children can not grab them. If grease catches fire in a pan, slide a lid over the pan to smother the flames and turn off the heat source. Keep lid on until pan is completely cooled.
5. Give space heaters - space keep portable and space heaters at least three feet (one meter) away from anything that can burn. Keep children and pets away from heaters and never leave heaters on when you leave home or go to bed.
6. Matches and lighters - tools, not toys - in a child's hand matches and lighters can be deadly. Buy child-resistant lighters and store all matches and lighters up high, where kids cannot see or reach them (preferably in a locked cabinet). Teach your children that lighters and matches are tools, not toys, and should only be used by adults or with adult supervision. Teach small children to tell a grown up if they find matches or lighters; older children should bring matches and lighters to adults immediately.
7. Cool a burn - run cool water over a burn for 10 to 15 minutes. If the burned skin blisters, or is charred, see a doctor immediately.
8. Use electricity safely - if an electric appliance smokes or has an unusual smell, unplug it immediately, then have it serviced before using it again. Replace any electrical cord that is cracked or frayed. Do not overload extension cords or run them under rugs. Do not tamper with your fuse box or use improper-sized fuses.



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9. Crawl low under smoke - during a fire, smoke and poisonous gases rise with the heat. The air is cleaner near the floor. If you must escape through smoke, crawl on your hands and knees to the nearest exit, keeping your head 12 to 24 inches (30 to 60 cm) above the floor.
10. Stop, drop, and roll if your clothes catch fire, do not run. Stop where you are, drop to the ground, cover your face with your hands, and roll repeatedly to smother the flame s.