

Lakeside at Saint Lucie West Homeowners Association, Inc.

FILES MUST BE DELIVERED OR MAILED.

Application process may take up to two weeks

CHECK ALL BOXES FOR A COMPLETE APPLICATION

- Sales Contract
- Application for Vehicle Permit
- Deed Restricted Form
- Vehicle Registration
- Moving Form
- Email Authorization
- Sales Certificate
- Disclosure Summary
- Insurance Form with Proof of Insurance**
- Let's Communicate
- Capital Contribution is required to this association, please see Disclosure Summary form.**
- \$100 Application Fee **Made Payable to Divine Association Management.**
- \$120 Application Fee **Made Payable to Lakeside at Saint Lucie West.**

\$150 Estoppel is completed by: Carr. Riggs & Ingram, LLC Paid by owner at Closing

If packet is incomplete your interview process will be delayed.

Drop off OR MAIL

1210 NW Sun Terrace

Port Saint Lucie Florida 34986

Mon- Friday 11am-1pm

LAKESIDE AT SAINT LUCIE WEST

RESALE PACKET

Realtor's _____ Company: _____ Phone: _____ Email: _____

Property Address: _____ Closing Date: _____

Information Concerning Applicant:

Name: _____ Name: _____

Present Address: _____

Do you intend to occupy? Yes__ No__ Phone: _____ Cell: _____

Pets: _____ (Must provide Photo and Updated Immunization Forms)

Email Address: _____

If Not mailing address: _____

Spouses Name: _____ Other Occupants _____

Phone: _____ Relationship: _____

Applicants Employer: _____ Phone: _____ Title: _____

Number of Years: _____ Address: _____

Applicants Employer: _____ Phone: _____ Title: _____

Number of Years: _____ Address: _____

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Please list names of nearest relatives in case of an emergency.

Name: _____ Address: _____

Phone: _____ Relationship: _____

If seller fails to provide a set of Documents to Buyer, a copy can be obtained by Association Management at a cost of \$50.

- I (we) hereby authorize investigation of all answers and references given.
- I (we) hereby abide by all documents and Rules and Regulations of Lakeside at Saint Lucie West HOA Inc. a copy of which was received from seller.
- Owner(s) agrees that the terms of the attached sales contract are within the requirement of Lakeside at Saint Lucie West HOA Inc. Rules and Regulations.
- I (we) hereby agree not to sell to any person who has not been approved by the Association.
 - I (we) hereby understand renting is prohibited.

Buyer: _____ Buyer: _____ Date _____

Application for Vehicle

LAKESIDE AT SAINT LUCIE WEST

Property Address: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Description of Vehicles(s):

<u>Vehicle #1</u>	<u>Vehicle #2</u>	<u>Vehicle #3</u>
<u>Make:</u>	<u>Make:</u>	<u>Make:</u>
<u>Model:</u>	<u>Model:</u>	<u>Model:</u>
<u>Year:</u>	<u>Year:</u>	<u>Year:</u>
<u>Color:</u>	<u>Color:</u>	<u>Color:</u>
<u>Tag:</u>	<u>Tag:</u>	<u>Tag:</u>
<u>State:</u>	<u>State:</u>	<u>State:</u>

*****All information must be completed.**

A copy of Vehicle Registration must be submitted with this application.

Any changes in vehicles must be submitted to the office. Please read the following disclosure:

No Commercial vehicle, recreational vehicle campers trailer boat van or truck of any kind

Buyer: _____ Buyer: _____ Date _____

Moving Form

Property Address: _____

I/We _____ understand that the covenants Lakeside at Saint Lucie West prohibit moving into the community on Sunday and Holiday.

I/we _____ further understand that the covenants also prohibit any moving vehicles (i.e. moving trucks, vans and /or trailers) from being parked overnight.

Signature _____ Date: _____

Signature _____ Date: _____

DEED RESTRICTED COMMUNITY

LAKESIDE AT SAINT LUCIE WEST

I (we) understand that we are moving to a deed restricted community. I (we) agree to abide by all Documents and Rules and Regulations of Lakeside at Saint Lucie West Homeowners Association, Inc., a copy was received from the seller. If seller fails to provide a set of Documents to Buyer, a copy can be obtained by Association Management at a cost of \$50.

Buyer: _____ Date _____

Buyer: _____ Date _____

*****Lakeside at Saint Lucie West HOA prohibits any owners from Leasing their units as stated in the Amended Declaration of Covenants and Restrictions dated 4/22/04 Article V Use of Property Section 1.

Email Authorization

We want to keep you better informed about the development and issues regarding your investment as an owner in the Lakeside at St. Lucie West HOA, Inc.

Florida statute states it is against the law to send mass emails to owners without their written consents. By completing, signing, and returning this form, you are authorizing the Board of Directors of the Lakeside at St. Lucie West HOA, Inc. and Divine Association Management to send you agendas of upcoming meetings, reports and actions taken by the Board at those meetings, and updates or special information. Your email address will not be used for any other purpose than those listed in the previous sentence.

Yes _____

I authorize Lakeside at St. Lucie West HOA, Inc. and Divine Association Management to email me appropriate Notices, agendas, reports, and other information.

Property Address: _____

Name: _____ Name: _____

Email Address: _____ Email: _____

Phone Number _____ Phone: _____

No _____

I do not want to receive emails from Lakeside at St. Lucie West HOA Inc and Divine Association Management except as required by the HOA By-Laws to be **sent by regular mail.**

Signature: _____ Date: _____

Signature: _____ Date: _____

Lakeside Must be listed as an Additional interest on the property

Date: _____

Name: _____

Address: _____

Telephone: _____

Insurance Co: _____

Insurance Agent Name: _____

Insurance Address: _____

Insurance Phone: _____

Homeowner Policy No: _____

(Sales Only)

VOTING CERTIFICATE

LAKESIDE AT ST. LUCIE WEST HOMEOWNERS ASSOCIATIONS, INC.

KNOWN ALL MEN BY THESE PRESENT, THAT THE UNDERSIGNED IS THE RECORD OWNER (S) LAKESIDE AT SAINT LUCIE WEST HOMEOWNERS ASSOCIATION, INC, SHOWN BELOW, AND HERBY CONSTITUTE AND DESIGNATES:

(INSERT ONE OWNERS NAME ABOVE)

As the voting representative for the HOMEOWNERS ASSOCIATION unit owned by said undersigned pursuant to the by-laws of the Association.

The aforementioned voting representative is hereby authorized and empowered to act in the capacity herein set forth until such time as the undersigned otherwise modifies or evokes the authority set forth in this voting certificate.

Date This _____ Day of _____, 20_____.

Signature

Signature

(Unit owner's signature-If jointly-owned, both owners' signatures required)

Property Address:

Port Saint Lucie Florida 34986

When there is a corporation or partnership as owners of the property, then a voting representative must be appointed by the corporation or partnership and become the representative. All owners must sign this form to acknowledge this appointment.

DISCLOSURE SUMMARY
for
Lakeside at ST. LUCIE WEST HOMEOWNERS
ASSOCIATION, INC.

1. As a purchaser of property in this community, you will be obligated to be a member of a homeowners association.
2. There have been or will be recorded restrictive covenants governing the use and occupancy of properties in this community.
3. You will be obligated to pay maintenance assessments to the association. Assessments may be subject to periodic change. The current amount is **\$850 per quarter**. You will also be obligated to pay any special assessment imposed by the association. Such special assessment may be subject to change. If applicable, the current amount is \$0.
4. You will also be obligated to pay a capital contribution equal to two (2) months' Assessments upon acquiring title. The current amount that will be collected is **\$566.67**.
5. You will be obligated to pay a special assessment to the respective municipality, county, or special district. All assessment are subject to periodic change.
6. Your failure to pay any of these or assessment could result in a lien on your property.
7. The statement contain in this disclosure form are only summary in nature, and as a perspective purchaser you should refer to the covenants and the association governing documents before purchasing the property.
8. These documents are either masters of public records and can be obtained from the record office in the county where the property is located or are not recorded and can be obtained from the developer.

Signature _____ Date _____

Signature _____ Date _____

Let's Communicate
(Lakeside Directory and Tele-Broadcast Authorization Form)

In order to be included in the Lakeside Directory or to receive Tele-broadcast messages or other neighborhood messages by telephone or email, each homeowner must provide written permission. Please fill out the form below and check the appropriate boxes.

Owner Names: _____

Lakeside Address: _____

Telephone Numbers: _____

Email Addresses: _____

Please respond to the statements below with yes or no.

_____ I would like to include my name, address, and phone number in the Lakeside Directory.

_____ I would like to include my email address in the Lakeside Directory.

_____ I would like to receive tele-broadcast messages via telephone or email.

Signature of owner: _____ Date: _____

Signature of owner: _____ Date: _____

Please return this form to Divine via mail or by dropping off this form at the Lakeside mailbox at the poolside.

The Lakeside at St. Lucie West c/o Divine Association Management

1680 SW Bayshore Blvd Suite 117 Port Saint Lucie Florida 34986

Phone: 772-240-1469

Email: Jessica@Divineassociations.com



Online Communication Portal for all your HOA needs.

We are pleased to announce that we provide all communication online through a secure online portal.

Here you will receive:

- Monthly/Weekly
 - Newsletter
 - Notices
- Architectural Forms
 - Documents
 - HOA Documents

Please fill out this form with your contact information. This information is kept strictly confidential to protect your privacy.

Please print clearly

Association Name: _____

Last Name _____ **First Name** _____

Phone Number: _____ Mobile _____ House _____

Email Address: _____

Last Name _____ **First Name** _____

Phone Number: _____ Mobile _____ House _____

Email Address: _____