

VILLAGE IN THE PINES

c/o Sunstate Management Group
P.O. Box 18809, Sarasota, FL 34276
Tel: 941.870.4920 / Fax: 941.870.9652

APPLICATION FOR PURCHASE/RENTAL PACKAGE

Thank you for taking an interest in living at Village in the Pines. The attached pages constitute the complete Purchase/Rental Application and Rules & Regulations of our community. Please take note that we are a 55 and Over community with strict guidelines that are stated within this package.

If you are purchasing a Unit, the Association requires a non-refundable, \$100. application fee, payable to Village in the Pines. Please be aware that all applications must be received at least ten (10) days prior to closing.

If you are renting a Unit for the first time, the Association requires a non-refundable, \$100. application fee, payable to Village in the Pines. Please be aware that all applications must be submitted must be submitted at least fourteen (14) days before the beginning of the lease term.

How to submit the application and required \$100 processing fee:

The application and check may be mailed to:

Sunstate Management Group
P.O. Box 18809
Sarasota, FL 34276

Please remember that applications will not be considered as received until application is deemed complete and receipt of payment verified.

Once Application is received:

1. It is the Owner's or Agent's responsibility to notify the applicant that there will be an in-person interview with the Screening Committee.
2. All out-of-area applicants will be interviewed via phone with an in-person interview before they arrive at Village in the Pines.

Important Facts to Consider

1. Assessments (monies owed to the Association) by the current owner, must be paid in full with a current balance of \$0 before an application may be submitted for consideration.
2. The Applicant must print legibly on the application. The Application must contain all information requested. If any information is omitted, the application will not be processed.
3. At least one of the occupants must be fifty-five (55) years of age or older.
4. No person under the age of eighteen (18) shall be permitted residency.
5. A Unit may be rented no more than one time per calendar year with a minimum lease period of two (2) months.
6. There are strict guidelines regarding pet restrictions. Please read the attached Rules & Regulations for details.
7. At no time, may a Unit be permanently occupied by more persons than three (3) persons per bedroom or five (5) people per unit.
8. Should a renter move into a Unit without the approval of the Association, the Association has the right to evict the renter(s) and the Unit Owner will be liable for all costs pertaining to the eviction process including attorney's fees.
9. Please be aware that should you be selling the Unit, it is the new Owner's responsibility to obtain an assessment book for payments of assessments to the Association, from the Management Company.

Unit Owner Signature: _____

Date: _____

Telephone Number(s): _____

Email Address: _____

If Unit Owner is NOT available for signature the Agent for the Unit Owner may sign below, accepting responsibility on the behalf of the Unit Owner.

Agent's Signature: _____

Date: _____

Telephone Number(s): _____

Email Address: _____

VILLAGE IN THE PINES

APPROVAL CRITERIA FOR PURCHASE/RENTAL

(Applicant(s) Signature Required)

1. At least one person residing within the Unit must be fifty-five (55) years of age or older.
2. No person under the age of eighteen (18) will be residing in the Unit.
3. The Criminal Record shall not contain evidence of any felony, prison terms served, 'wanted status', sexual predator history, or other such factors bearing on moral character.
4. The Criminal Record shall not contain evidence of any misdemeanor convictions for destruction of property, public nuisance, disorderly conduct or any other offense which shows a history of disregarding safety and/or peaceful living of those in close proximity.
5. The Association shall not discriminate against any applicant on the basis of race, color, religion, national origin, sex, marital status or age.

AUTHORIZATION OF RELEASE OF INFORMATION

Applicant(s) represent that all of the information and statements for purchase or lease are true and complete, and hereby authorize an investigative consumer report including, but not limited to, residential history, employment history, criminal records and credit reports. I am aware that any falsification or misrepresentation of the facts in this application will result in immediate rejection of this application.

Applicant:

Full Name (print): _____

Signature: _____

For Office Use Only:

We, the members of the Screening Committee have talked to, or met with the applicant listed above. It is the Committee's recommendation that the Board of Directors Approve Deny this application.

All required information pertaining to the sale or lease of this Unit was received by:

Name: _____

Date: _____

APPLICANT AGREEMENT WITH ASSOCIATION

(Applicant Signature Required)

I hereby agree to the following:

1. To be aware and abide by all the applicable Use Restrictions, as well as the Rules and Regulations governing the use of Units and the condominium property.
2. By signing below, I certify that I have received a copy of the Use Restrictions and Rules and Regulations, and that I further agree to take full responsibility for any guests that I may have, and that they will also abide by the same Rules and Regulations.
3. By signing below, I acknowledge that any violation of the terms, provisions, and covenants of the condominium documents, including the Rules and Regulations, provides for immediate action as provided in these documents.
4. By signing below, I acknowledge that Village in the Pines has fourteen (14) days to consider this application, after it is received by the Association, and that occupancy of the unit before approval of this application will result in the disapproval of the application and immediate action by the Association for eviction.

Applicant Signature: _____

Date: _____

Print Name: _____

VILLAGE IN THE PINES

APPLICATION FOR APPROVAL TO PURCHASE OR LEASE A UNIT

Application for:

Purchase

Lease

Occupancy (Not on Lease)

Unit #: _____ Address: _____

Term of Lease (if applicable): From _____ to _____

Unmarried applicants must fill out separate applications. Do not leave any blank spaces. Please use black ink.
Please allow at least ten days for approval process. Thank you!

Name: _____ SS# ____ / ____ / ____ DOB: ____ / ____ / ____
Last First MI

Spouse: _____ SS# ____ / ____ / ____ DOB: ____ / ____ / ____
Last First MI

Home Phone Number: _____ Cell Number: _____ Work Number: _____

Email Address: _____

Other Occupants (Related children OVER the age of 18):

| | | |
|-------------|---------------------|------------|
| Name: _____ | Relationship: _____ | Age: _____ |
| Name: _____ | Relationship: _____ | Age: _____ |
| Name: _____ | Relationship: _____ | Age: _____ |
| Name: _____ | Relationship: _____ | Age: _____ |

Address History

Present Address: _____
Street Apt # City State Zip Code

Vehicle Information

Please read the attached Rules & Regulations regarding acceptable and prohibited vehicles.

Vehicle #1: Make: _____ Model: _____ Year: _____ Tag Number: _____

Vehicle #2: Make: _____ Model: _____ Year: _____ Tag Number: _____

Applicant Signature

Date: ___ / ___ / ___

Spouse Signature

Date: ___ / ___ / ___