



Coconut Cove Marina Checklist

- Application Page
- Vehicle Information Page
- Deed Restricted Community Page
- Pet Page
- Email Consent Form
- Maintenance Payment Options (Sales)
- Disclosure Summary (Sales)
- Authorization for Applicant Screening
- Color copy of photo ID – (Must be legible)
- Voting Certificate
- Copy of executed Lease/ Sales Contract
- Non-refundable Processing Fee of \$125.00 or \$150.00 RUSH (less than 2 weeks occupancy) payable to Watson Association Management, LLC
- Application fee of \$100.00 payable to Coconut Cove Marina

**Please make sure when submitting your application
all documents and fees are included.**

***** If an application is submitted that is ***NOT*** complete, it will ***NOT*** be accepted and/or processed. Please ensure that you have all the required information, forms and signatures to avoid any delay(s) in the approval of your application.

***Please submit and/or send all complete applications and fees to Watson Association Management, LLC office located at 430 NW Lake Whitney Place, Port St. Lucie, FL 34986**

****** A Capital Contribution equal to two (2) months' Assessments (\$1,566.46) will be collected upon acquiring title. ******

430 NW Lake Whitney Place, Port St. Lucie, FL 34986
435 S. Yonge Street #3, Ormond Beach, FL 32174
1410 Palm Coast Parkway NW, Palm Coast, FL 32137

Phone 772.871.0004 Fax 772.871.0005
Phone 386.252.2661 Fax 386.673.4943
Phone 386.239.1555 Fax 386.246.9271



Association Management

LEASE/RESALE APPLICATION

Date: _____ Property Address: _____

Applicant Name: _____ Active Military Service Member ____ Yes ____ No

Co-Applicant Name: _____ Active Military Service Member ____ Yes ____ No

Present Address: _____

Applicant Phone: _____ Co-Applicant Phone: _____

Any other occupants? _____ If so, please list the name(s), age(s) and relationship:

Do you intend to:

- Live in the unit as a primary residence
- Maintain the unit as a secondary residence
- Offer the unit as a rental
- Rent from Owner

Applicants employers name: _____ No. of years there _____

Address: _____ Phone #: _____

Co-Applicants employers name: _____ No. of years there _____

Address _____ Phone #: _____

I/WE HEREBY AGREE TO ABIDE BY ALL DOCUMENTS AND RULES & REGULATIONS OF COCONUT COVE MARINA HOMEOWNERS ASSOCIATION, INC. A COPY OF WHICH DOCUMENT I HAVE RECEIVED FROM SELLER/LESSOR.

(IF SELLER/LESSOR FAILS TO PROVIDE A SET OF DOCUMENTS TO BUYER/LESSEE, A COPY WILL BE MADE AVAILABLE BY THE ASSOCIATION MANAGEMENT COMPANY AT A COST OF \$50.00 PER DOCUMENT COPY.)

LESSEE/PURCHASER: _____ Date: _____
Signature(s)

LESSEE/PURCHASER: _____ Date: _____
Printed Name(s)

LESSEE/PURCHASER: _____ Date: _____
Signature(s)

LESSEE/PURCHASER: _____ Date: _____
Printed Name(s)

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Association Management

APPLICATION FOR VEHICLE PERMIT

Name: _____ Phone: _____
Name: _____ Phone: _____
Street Address: _____
City: _____ State: _____ Zip: _____

DESCRIPTION OF VEHICLE(S):

VEHICLE #1:

Make: _____ Model: _____ Year: _____
Color: _____ Gross Weight: _____ VIN: _____
Vehicle Tag: _____ State: _____
Registered to: _____
Street Address: _____
City: _____ State: _____ Zip: _____

VEHICLE #2:

Make: _____ Model: _____ Year: _____
Color: _____ Gross Weight: _____ VIN: _____
Vehicle Tag: _____ State: _____
Registered to: _____
Street Address: _____
City: _____ State: _____ Zip: _____

PLEASE NOTE:

- ALL INFORMATION ON THIS FORM MUST BE COMPLETED
- ANY CHANGES IN USE OR APPEARANCE OF THE ABOVE DESCRIBED VEHICLE (S) MUST BE SUBMITTED TO THE BOARD OF DIRECTORS WITH A NEW FORM

Signature: _____ Date: _____

Signature: _____ Date: _____

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**Deed Restricted Community**

I/We understand that we are moving into a deed-restricted community.  
I/We hereby agree to abide by all Documents and Rules and Regulations  
of COCONUT COVE MARINA HOMEOWNERS ASSOCIATION,  
INC., a copy of which I/We have received from the owner.

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Lessee/Buyer
Signature _____ Date: _____

Lessee/Buyer
Signature _____ Date: _____

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PET PAGE

PLEASE ADVISE US OF ANY ANIMALS TO BE RESIDING IN THE UNIT

- No more than 2 pets without Board approval. No cat, dog or any other pet that is permitted by the Rules and Regulations weighing in excess of fifty (50) pounds shall be allowed to be kept or harbored at the property without the prior written approval of the Board of Directors as to Owners or its designated managing agent as to tenants, which approval may be granted or denied in the sole, absolute and arbitrary discretion of said Board or managing agent.
- Dogs which are household pets shall at all times whenever they are outside a unit be confined on a leash held by a responsible person.
- All owners shall immediately pick up and remove any solid animal waste deposited by his pet on the properties, including the common areas and the exclusive neighborhood common area.

Pets _____ Yes or _____ No

PET #1:

Type: _____ Name: _____
Breed: _____ Weight: _____ Color: _____

PET #2:

Type: _____ Name: _____
Breed: _____ Weight: _____ Color: _____

I/WE UNDERSTAND IF NOT COMPLIED WITH I WILL BE IN VIOLATION AND ACTION WILL BE TAKEN BY THE BOARD.

Signature Date

Signature Date

FOR ASSOCIATION USE ONLY

The above application is approved _____ not approved _____

Reason for non-approval: _____

Signer: _____ Position: _____ Date: _____

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EMAIL CONSENT FORM

A new 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 Coconut Cove Marina Homeowners Association, Inc. and Watson Association Management to email notifications of Association meetings, minutes or other correspondence in lieu of receiving them by regular mail. Your email address will **not** be used for any other purpose than those listed in the previous sentence.

I also understand that Annual owner meetings and Special Meetings requiring membership voting, or establishing a quorum will NOT be sent via E Mail but via regular or certified mail as prescribed by law.

Yes

I authorize Coconut Cove Marina Homeowners Association, Inc. and Watson Association Management to email me appropriate meeting notices, minutes, reports, and other correspondence.

Email Address: _____

Property Address: _____

Phone Number(s): _____

Signature(s): _____

Printed Name(s): _____

No

I do not want to receive emails from Coconut Cove Marina Homeowners Association, Inc. and Watson Association Management.

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MAINTENANCE FEE PAYMENT OPTIONS

- Option 1:** Mail Payments: 430 NW Lake Whitney Place, Port St. Lucie, FL 34986

or

- Option 2:** Direct Payments (ACH Debits): Please complete the following, and return same with this Resale Application:

Association Name: Coconut Cove Marina Unit Account Number _____

I (we) hereby authorize CenterState Bank, to initiate debit entries from the bank account indicated below for the benefit of the depository named below. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law. ***I (we) confirm that the source of the funds for payment of these debit entries will NOT originate from a Financial Agency's office located outside the territorial jurisdiction of the United States.***

Bank Name _____

Branch _____

City _____ State _____ Zip _____

Routing Number _____

Account Number _____

This authorization is to remain in full effect until the Originator has received written notification from the bank account owner(s) of any termination. This should be done in a suitable manner to allow all parties involved the opportunity to process any changes within a reasonable amount of time.

Name (please print) _____

Name (please print) _____

Account Holder Signature _____ Date _____

Account Holder Signature _____ Date _____

Note: In case of revoked authorization, written notification must be made to the originator no later than 15 days before the effective date of the next transaction.

Please attach a VOIDED check

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**Disclosure Summary For
COCONUT COVE MARINA 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 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 **\$2,349.68** per quarter.
4. You will be obligated to pay a Capital Contribution to Coconut Cove Marina HOA equal to two (2) months' Assessments upon acquiring title. The current amount that will be collected is **\$1,566.46.** I/We understand this is not a prepayment of quarterly assessments.
5. You may be obligated to pay a special assessment to the respective municipality, county, or special district. All assessments are subject to periodic change.
6. Your failure to pay any of these assessments could result in a lien on your property.
7. The statements contained in this disclosure form are only summary in nature and, as a prospective purchaser you should refer to the covenants and the association governing documents before purchasing property.
8. These documents are matters of public record and can be obtained from the record office in the county where the property is located or from Watson Association Management, LLC for a fee.

Purchaser: _____ Date: _____

Purchaser: _____ Date: _____

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**A SEPARATE AUTHORIZATION FORM IS REQUIRED FOR EACH APPLICANT
A COLOR COPY OF PHOTO ID MUST BE ATTACHED**

GENERAL AUTHORIZATION FOR APPLICANT SCREENING

Applicant Name: _____ **DOB:** _____

Social Security Number: _____ **Phone:** _____

Present Address: _____

City: _____ **State:** _____ **Zip:** _____

Previous Address: _____

City: _____ **State:** _____ **Zip:** _____

Applicant hereby Authorizes Coconut Cove Marina Homeowners Association, Inc. and its Agent, Watson Association Management, LLC, to obtain and verify a social security number, credit report and criminal background screening required to process his/her application for residency.

Applicant agrees to indemnify and hold harmless Coconut Cove Marina Homeowners Association, Inc. and Watson Association Management, LLC., their employees, managers, officers and directors, affiliates, subcontractors, and agents from any loss, expense or damage which may result directly or indirectly from information or reports furnished by Watson Association Management, LLC.

Applicant Signature: _____

Date: _____

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(SALES ONLY)

VOTING CERTIFICATE

Coconut Cove Marina Homeowners Association, Inc.

Know all men by these present, that the undersigned is the record owner (s) In COCONUT COVE MARINA HOMEOWNERS ASSOCIATION, INC. shown below, and hereby constitutes, appoints and designates:

(Insert one owners name above)

As the voting representative for the Coconut Cove Marina Homeowners Association, Inc., 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.

Dated this _____ day of _____, 20_____.

Signature

Signature

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

Property Address _____

Ft. Pierce, FL 34949

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 becomes the representative. All owners must sign this form to acknowledge this appointment.

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