

Riverwalk at Melbourne Lease/Resale Checklist

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- o Email Consent form
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- Lease/Resale Contract
- o Gate Form
- Non-refundable Processing fee in the amount of \$100.00 payable to Watson Association Management

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

*If an application is submitted that is <u>NOT</u> complete, it will <u>NOT</u> be accepted and/or processed. Please ensure that you have all the required <u>information</u>, <u>forms</u> and <u>signatures</u> 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

Phone 386.239.1555 Fax 386.246.9271

LEASE/RESALE APPLICATION

Date:	Property Address:		
Applicant Name:		Phone/Cell #:	
Co-Applicant Name:		Phone/Cell #	:
Current Mailing address:			
Any other Occupants?	If Yes, list names, age and relation	onchin:	
	-	_	
Name	Relation	Age	_
Name	Relation	Age	
Do you intend to:			
☐ Live in the home a ☐ Maintain the home ☐ Offer the unit as a	as a secondary residence		
Applicants employers name:		No.	of years there
Address:		Pho	one #:
Co-Applicants employers na	me:	No.	of years there
Address:		Pho	one #:
HOMEOWNERS ASSOCIATION (IF SELLER FAILS TO PROVI	SIDE BY ALL DOCUMENTS AND RULES & PON, INC., A COPY OF WHICH I HAVE RECEDED A SET OF DOCUMENTS TO BUYER, A COST OF \$50.00 PER DOCUMENTS TO BUYER.	EIVED FROM SELLER. COPY WILL BE MADE AVAILA	
LESSEE/PURCHASER:	Signature(s)		Date:
LESSEE/PURCHASER:			Date:
	Printed Name(s)		
LESSEE/PURCHASER:	Signature(s)		Date:
LESSEE/PURCHASER:	_		Date:
435 S. Yonge Street	y Place, Port St. Lucie, FL 34986 #3, Ormond Beach, FL 32174 kway NW, Palm Coast, FL 32137	Phone 772.871.0004 Phone 386.252.2661 Phone 386.239.1555	Fax 772.871.0005 Fax 386.673.4943 Fax 386.246.9271

VEHICLE INFORMATION

Name:			Phone	9:	
Name:			Phone):	
Street A	Address:				
City:			State:	Zip:	
DESCRIPTION	ON OF VEHICLE:				
VEHICLE #1	<u>:</u>				
Make: _		Model:		Year:	
Color: _		Gross Weight:	VIN:		
Vehicle	Tag:	State:			
VEHICLE #2	<u>.</u>				
Make: _		Model:		Year:	
Color: _		Gross Weight:	VIN:		
Vehicle	Tag:		State:		
Vehicle	2 registered to:				
City:			State:	Zip:	
	***NO TRUCK OR VAN VEHICLE OR COMME ANY PORTION OF TH ANY OF THE FOREGO THE GARAGE DOOR ***ANY CHANGES IN U	RCIAL VEHICLE SHALL BE E PROPERTY FOR MORE TH DING VEHICLES MAY BE STO IS FULLY CLOSED WHILE SU	CAPACITY, BC PARKED, STOF AT TWENTY-FC DRED IN THE G ICH VEHICLE IS	SCRIBED VEHICLE(S) MUST	ON IAT AS
Signature		Date	Signature		Date



Deed Restricted	Community
I/We understand that we are moving in I/We hereby agree to abide by all Docu of RIVERWALK AT MELBOURNE I have received from the owner.	ments and Rules and Regulations
Buyer/Lessee Signature	Date:
Buyer/Lessee Signature	Date:



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

- The breed of dog commonly known as "pit bull" is prohibited.
- No pets shall be kept, bred, or maintained for any commercial purpose.
- ➤ Dogs which are household pets shall always whenever they are outside a unit be confined on a leash held by a responsible person.
- An owner 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.
- No more than two (2) household pets may be kept.

No

Pet(s)? Yes

<u>Color/Name</u>	<u>Weight</u>
D	ate:
D	uic
<i>7</i> 0	ate:
	D

EMAIL CONSENT FORM

New Florida statutes state it is against the law to send mass emails to owners without their written consent. By completing, signing, and returning this form, you are authorizing the Board of Directors of the Riverwalk at Melbourne Homeowners Association, Inc. and Watson Association Management to send you information of the Association meetings, reports on actions taken by the Board at those meetings, violations, updates and/or special information. Your email address will **not** be used for any other purpose than those listed in the previous sentence.

We want to keep you better informed about the developments and issues regarding your investment as an owner in the Riverwalk at Melbourne Homeowners Association, Inc.

* * * * * * * * * * * * * * * * * * *	**************************************
	reports, violation letters and other information.
	Email Address:
	Property Address:
	Phone Number(s):
	Signature(s):
	Printed Name(s):
<u>No</u> □	
	I do not want to receive emails from Riverwalk at Melbourne Homeowners Association, Inc. and Watson Association Management.



MAINTENANCE FEE PAYMENT OPTIONS

□ Option 1: Coup	on Book:		
or			
Option 2: <u>Direct</u> with this Resale		Please complete the following, and retu	ırn same
Association Name: Riverw	alk of Melbourne Unit A	Account Number	
benefit of the depository nat account must comply with the	med below. I (we) acknowledge provisions of U.S. law. I (w	ebit entries from the bank account indicated belonge that the origination of ACH transactions to the confirm that the source of the funds for paragency's office located outside the territorial junification.	my (our) ayment of
Bank Name			
Branch			
City	State	Zip	
Routing Number			_
Account Number			_
owner(s) of any termination.		or has received written notification from the bandable manner to allow all parties involved the op	
Name (please print)			
Name (please print)			
Account Holder Signature _		Date	_
Account Holder Signature _		Date	_
Note: In case of revoked au before the effective date of t		n must be made to the originator no later than	n 15 days

Please attach a VOIDED check



Disclosure Summary For Riverwalk at Melbourne Homeowners Association

- 1. As a purchaser of property in this community, you will be obligated to be a member of a homeowner's association.
- 2. There have been recorded restrictive covenants governing the use and occupancy of properties in this community.
- You will be obligated to pay maintenance assessments to the association.
 Assessments may be subject to periodic change. The current amount is \$221.50 per month.
- 4. You may also be obligated to pay any special assessments that may be imposed by the association.
- 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:



(SALES ONLY)

VOTING CERTIFICATE Riverwalk at Melbourne Homeowners Association, Inc.

Know all men by these present, that the undersigned is Homeowners Association, Inc. shown below, and here	· ·
(Insert one o	wners name above)
As the voting representative for the HOMEO' undersigned pursuant to the by-laws of the As	WNERS ASSOCIATION unit owned by said ssociation.
•	d and empowered to act in the capacity herein set s or evokes the authority set forth in this voting
Dated this day of	, 20
Signature (Unit owner's signature – If jointly-	Signature owned, both owners' signatures required)
Property Address Melbourne, FL 329	235

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.



SECURITY GATE & INFORMATION FORM

Welcome to the neighborhood. Each new household will be provided with one gym/restroom key at no charge. You may purchase additional keys at the address above. Checks or Money Orders made payable to Riverwalk at Melbourne HOA.

No CASH or Plastic accepted.

GATE ACCESS INFORMATION:

EXTRA GYM/RESTROOM KEYS ARE \$10.00 EACH

GATE REMOTES \$20.00 EACH

Please print clearly		
Owners Name:		

(ONLY 13 CHARACTERS WILL FIT ON A LINE ... LAST NAME, FIRST INITIAL)

PROPERTY ADDRESS:

PHONE #:

FOUR DIGIT GATE CODE:

(PERSONAL GATE CODE)

GATE REMOTES RECEIVED:

DECALS RECEIVED:

GYM/RESTROOM KEY ISSUED:

TODAY'S DATE:

OWNERS SIGNATURE:

AMOUNT PAID: