

Tompson Point Check List

- o Lease/Resale Application
- Vehicle Registration Form
- o Vehicle Registration
- o Deed Page
- o Landlord/Purchaser
- Email Consent form
- Voting Certificate (Sales Only)
- o Lease/Resale Contract
- o PGA Village Certification of Compliance (Leases Only)
- Non-refundable Processing fee \$125.00 OR \$150.00 Rush fee payable to Watson Association Management
- o Application Fee \$100.00 payable to Tompson Point
- Tompson Point Capital Contribution (1/6th of Annual Assessment) Call for current amount (Sales Only) collected at closing

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

- * An application is considered a **RUSH** when the Closing/Lease date is **TWO (2)** weeks from the date you submit your Lease/Resale application.
- * 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 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 office located at 1648 SE Port St Lucie Blvd., Port St. Lucie, FL 34952



LEASE/RESALE APPLICATION

PLEASE ALLOW FIFTEEN (15) BUSINESS DAYS FOR PROCESSING

Date Property Address		
INFORMATION CONCERNING APPLICANT(s):		
Applicant Name:Active	Military Service Membe	erYesNo
Co-Applicant Name: Active	e Military Service Membe	er YesNo
Present Address:		
Applicant Phone:Co-App	licant Phone:	
Any other OccupantsYesNo If so, please list na	ame, age & Relationship	
Name Relation	Age	_
Name Relation	Age	_
 Do you intend to: O Live in the home as a primary residence O Maintain the home as a secondary residence O Offer the home as a rental O Rent home from owner 		
কর্তকর্তকর্তকর্তকর্তকর্তকর্তকর্তকর্তকর্ত		
Phone Relationship		
I (we) fully authorize investigation of all answers and reference		
I (we) hereby agree to abide by all rules and regulations of TO which was received from the Lessor/Seller. If seller fails to provide a set of Documents to Buyer, a copy of at a cost of \$50.00.	OMPSON POINT RESERVE	
I agree that I will not rent or sell to any person who has not be Renters are not permitted to sub-lease their premises.	en approved by the Associa	ttion.
PURCHASER/LESSEE	DATE	
PURCHASER/LESSEE	DATE	
1648 SE Port St. Lucie Blvd., Port St. Lucie, FL 34952 808 Dunlawton Avenue, Port Orange, FL 32127 1410 Palm Coast Parkway NW, Palm Coast, FL 32137	Phone 772.871.0004 Phone 386.252.2661 Phone 386.246.9720	Fax 386.673.4943

VEHICLE INFORMATION

NAME(S) ______ TELEPHONE ______ STREET ADDRESS _______ CITY_______ STATE _______ ZIP ______

DESCRIPTION OF VEHICLE:

\ /	ш	וייו	#1	•

MAKE	MODEL	YEAR
COLOR	GROSS VEHICLE WEIGHT	TAG

____ STATE _____

VEHICLE #2:

VIN

CITY ___

SIGNATURE

: #2:		
MAKE	MODEL	YEAR
COLOR	_ GROSS VEHICLE WEIGHT	TAG
VIN	STATE	
OWNERSHIP OF VEHICLE:		
VEHICLE(S) REGISTERED TO:		
STREET ADDRESS:		

***ALL INFORMATION ON THIS FORM MUST BE COMPLETED

DATE

***ANY CHANGES IN USE OR APPEARANCE OF THE ABOVE DESCRIBED VEHICLE(S)
MUST BE SUBMITTED TO THE BOARD OF DIRECTORS WITH A NEW APPLICATION

SIGNATURE

__STATE _____ ZIP ___

***A COLOR PHOTOGRAPH OF ABOVEMENTIONED VEHICLE(S) MUST BE ATTACHED IF VEHICLE(S) IS/ARE OUTLINED IN ARTICLE 5, PARAGRAPH E OF DECLARATION OF COVENANTS AND RESTRICTIONS AS PARAPHRASED: "MOTORCYCLES, ALL TERRAIN VEHICLES INCLUDING PASSANGER CARS WITH FOUR WHEEL DRIVE, JEEPS, BRONCOS, TRUCK, TRAILER, BOAT, VAN CAMPER, MOTORHOME OR BUS".

IT IS UNDERSTOOD THAT ANY VEHICLE DESCRIBED IN THE PARAGRAPH ABOVE MUST BE PARKED IN GARAGE.

SIGNATURE SIGNATURE

PLEASE AFFIX THE TOMPSON POINT RESERVE VEHICLE DECAL TO THE LOWER INSIDE CORNER OF WINDSHIELD ON THE DRIVER'S SIDE.

*** A COPY OF THE VEHICLE REGISTRATIONS MUST BE ATTACHED TO APPLICATION

1648 SE Port St. Lucie Blvd., Port St. Lucie, FL 34952 808 Dunlawton Avenue, Port Orange, FL 32127 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 386.246.9720 Fax 386.246.9271

DATE



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 TOMPSON POINT RESERVE POA, INC. I (we) received a copy from the Lessor/Seller. If seller fails to provide a set of Documents to Buyer, I (we) may obtain a copy from the Association Management at a cost of \$50.00.

Buyer/Lessee signature	
Date	
Buyer/Lessee signature	
Date	



Landlord / Purchaser

Please advise us of any changes in your mailing address

Property Address:		
<u>Landlord / Purchaser</u>		
Name(s):		
Phone:	Cell:	
Email:		
Separate Mailing Address (if applicable)		
Address:		
Phone:		
Emergency Contact Information		
Name:		
Relationship:		
Phone:		



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 Tompson Point HOA 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 Tompson Point HOA, Inc.

Yes □	I authorize Tompson Point and Watson Association Management to email me appropriate meeting notices, agendas, reports, violation letters and other information.
	Email Address:
	Property Address:
	Phone Number(s):
	Signature(s):
	Printed Name(s):
<u>No</u> □	
Ц	I do not want to receive emails from Tompson Point and Watson Association Management.



(SALES ONLY)

VOTING CERTIFICATE Tompson Point Reserve Property Owners Association, Inc.

KNOW ALL MEN BY THESE PRESENT, THAT THE UNDI TOMPSON POINT RESERVE PROPERTY OWNERS ASS CONSTITUTES, APPOINTS AND DESIGNATES:	
(Insert one owners	s name above)
As the voting representative for the PROPERTY Cundersigned pursuant to the by-laws of the Associa	· · · · · · · · · · · · · · · · · · ·
The voting representative is hereby authorized and forth until the undersigned otherwise modifies or ecertificate.	<u> </u>
DATED THISDAY OF	, 20
Signature (Unit owner's signature – If jointly-owner)	Signature ed, both owners' signatures required)
Property Address Port Saint Lucie, Florida 34	986

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.

PGA VILLAGE PROPERTY OWNERS' ASSOCIATION, INC. CERTIFICATION OF COMPLIANCE WITH SUB-ASSOCIATION LEASING RULES

Leased Property Address:		
Sub-Association Name:		
Owner Name(s):		
· · · · · · · · · · · · · · · · · · ·		
TENANT(S) ACKNOWLEDGE AND AG	BREE TO THE FOLLOWING:	
Association, Inc. and the above-named Covenants, Conditions and Restrictions		
TENANT(S):		
Signature	Signature	
Printed Name	Printed Name	
Date	Date	
SUB-ASSOCIATION LEASE APPLICATION APPROVAL & CERTIFICATE OF OCCUPANCY The undersigned Sub-Association representative certifies that the above-named tenant has complied with the Sub-Association's leasing rules and procedures.		
Signed:	Date:	
Sub-Association Representative Printed	Name:	
Title of Sub-Association Representative:	· · · · · · · · · · · · · · · · · · ·	
Sub-Association Contact Telephone No		