



Villas of Torino Check List

- Lease / Resale Information Form
- Vehicle Registration Form
- Deed Page
- Disclosure Summary (Sales Only)
- Email Consent Form
- Voting Certificate (Sales Only)
- Lease / Resale Contract
- \$125.00 payable to Watson Association Management (Non-refundable Processing Fee)

* **All Lease/Resale Applications and Estoppel Requests **MUST** have TEN (10) days to process prior to closing date.**

* 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 1648 SE Port St Lucie Blvd., Port St. Lucie, FL 34952**

Thank you for your Cooperation!

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



Association Management

Lease / Resale Information Form

Property Address: _____ Date: _____

Applicant Information

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 Yes, list names, age and relationship:

Name _____ Relation _____ Age _____

Name _____ Relation _____ Age _____

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

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Pet: Yes No Type: \_\_\_\_\_ Weight: \_\_\_\_\_ lbs. Name: \_\_\_\_\_ Color: \_\_\_\_\_  
(Circle one)

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Please list the name & number of the nearest relative in case of an emergency:

Name: _____ Phone #: _____

Address: _____

- ◆ I/WE FULLY AUTHORIZE INVESTIGATION OF ALL ANSWERS AND REFERENCES GIVEN.
- ◆ I/WE HEREBY AGREE TO ABIDE BY ALL DOCUMENTS AND RULES & REGULATIONS OF VILLAS OF TORINO COMMUNITY ASSOCIATION, A COPY OF WHICH DOCUMENT I HAVE RECEIVED FROM LESSOR/SELLER.

PLEASE NOTE:

- ◆ Leases must be a minimum of twelve months (12).
- ◆ Renters are not permitted to sub-lease at any time.
- ◆ A copy of the sales contract or lease must be attached to this application.

PURCHASER/LESSEE: _____ Date: _____

PURCHASER/LESSEE: _____ Date: _____

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Association Management

VEHICLE REGISTRATION FORM

Property Address: _____ Date: _____

Name: _____
(All Applicants)

Present Address: _____
(Street address, City, State, Zip)

VEHICLE # 1:

Make: _____
Model: _____
Year: _____
Color: _____
VIN: _____
Tag: _____
State: _____

VEHICLE # 2:

Make: _____
Model: _____
Year: _____
Color: _____
VIN: _____
Tag: _____
State: _____

Vehicle 1 registered to: _____

Vehicle 2 registered to: _____

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 APPLICATION.
- ◆ IT IS CLEARLY UNDERSTOOD THAT CARS MUST BE PARKED IN THE DESIGNATED PARKING SPACE.

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 Regulation of Villas of Torino Community Association. 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 Management Company at a cost of \$35.00.

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Buyer/Lessee
Signature: _____

Date: _____

Buyer/Lessee
Signature: _____

Date: _____



Association Management

Disclosure Summary
Sales Only

Villas of Torino

1. As a purchaser of property in this community, you will be obligated to be a member of a community 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 assessments to the association, which assessments are subject to periodic change.
4. Your failure to pay these assessments could result in a lien on your property.
5. 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.
6. These documents are matters of public record and can be obtained from the record office in the county where the property is located.

Purchaser: _____
Signature

Date

Purchaser: _____
Signature

Date

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EMAIL CONSENT FORM

New Florida statutes state 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 Villas of Torino Community 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 Villas of Torino Community.

Yes

I authorize Villas of Torino Community Association, Inc. 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): _____

No

I do not want to receive emails from Villas of Torino Community Association, Inc. and Watson Association Management.

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(SALES ONLY)

VOTING CERTIFICATE
Villas of Torino Community Association, Inc.

Know all men by these present, that the undersigned is the record owner (s) In VILLAS OF TORINO COMMUNITY ASSOCIATION. shown below, and hereby constitutes, appoints and designates:

(Insert one owners name above)

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

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

Dated this _____ day of _____, 20____.

Signature

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

Signature

Property Address _____

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

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