

Villas of Torino Check List

- o Lease / Resale Information Form
- Vehicle Registration Form
- Deed Page
- o Disclosure Summary (Sales Only)
- o Maintenance Fee Options (Sales Only)
- o Email Consent Form
- Voting Certificate (Sales Only)
- o Lease / Resale Contract
- Non-refundable Processing Fee \$125.00 payable to Watson Association Management
- o Coupon book fee \$7.50 payable to Villas of Torino (if applicable)
- * 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 <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, LLC office located at 430 NW Lake Whitney Place, Port St. Lucie, FL 34986

Thank you for your Cooperation!

Lease / Resale Information Form

Property Address:		Date:		
	Applicant Infor	<u>mation</u>		
Applicant Name:	Activ	ve Military Service Member	Yes _	No
Co-Applicant Name:	Acti	ve Military Service Member	· Yes _	No
Present Address:				
Applicant Phone:	Co-Ap	plicant Phone:		
Any other Occupants? _	If Yes, list names, age and	l relationship:		
Name	Relation	Age		
Name	Relation	Age		
☐ Offer the unit as a☐ Rent from Owner	as a secondary residence rental			
Pet: Yes No Type: (Circle one) প্রকাশকার্থকার্থকার্থকার্থকার্থকার্থকার্থকার্থ	Weight:	bs. Name: ককককককককককককককক	Color:	
	nber of the nearest relative in case o	Phone #:		
	ZE INVESTIGATION OF ALL ANSWERS AND REF			
•	TO ABIDE BY ALL DOCUMENTS AND RULES & R ICUMENT I HAVE RECEIVED FROM LESSOR/SEL		MMUNITY ASSOC	CIATION,
 Renters are not per 	minimum of twelve months (12). ermitted to sub-lease at any time. s contract or lease must be attached	to this application.		
PURCHASER/LESSEE:		Date:		
PURCHASER/LESSEE:		Date:		
	/ Place, Port St. Lucie, FL 34986 #3, Ormond Beach, FL 32174	Phone 772.871.0004 F Phone 386.252.2661 F	ax 772.871.0 ax 386.673.4	

Phone 386.239.1555 Fax 386.246.9271

1410 Palm Coast Parkway NW, Palm Coast, FL 32137

VEHICLE REGISTRATION FORM

Property Address:	Date:
Name:(All Applicants)	
Present Address: (Street address, City, State, Zip)	
VEHICLE # 1:	VEHICLE # 2:
Make:	Make:
Model:	Model:
Year:	Year:
Color:	Color:
VIN:	VIN:
Tag:	Tag:
State:	State:
Vehicle 1 registered to:	
Vehicle 2 registered to:	
 PLEASE NOTE: ◆ ALL INFORMATION ON THIS FORM MU ◆ ANY CHANGES IN USE OR APPEARANCE MUST BE SUBMITTED TO THE BOARD OF THE	
Signature:	Date:
Signature:	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 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:	



# **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	



#### **MAINTENANCE FEE PAYMENT OPTIONS**

	upon Book (for mailing pa	yments): Please include a check for \$7.50	
or			
Option 2: <u>Dire</u> with this Resale	` · · · · · · · ·	: Please complete the following, and return sa	ıme
Association Name: Villas	of Torino	Account Number	
of the depository named be must comply with the provi	elow. I (we) acknowledge that sions of U.S. law. <i>I (we) confir</i>	the origination of ACH transactions to my (our) account that the source of the funds for payment of these dice located outside the territorial jurisdiction of the University	ount <i>lebit</i>
Bank Name			
Branch			
City	State	Zip	
Routing Number			
Account Number			
owner(s) of any termination		ator has received written notification from the bank acceptable manner to allow all parties involved the opportu	
Name (please print)			
Name (please print)			
Account Holder Signature		Date	
Account Holder Signature		Date	
Note: In case of revoked a	uthorization, written notificatio	on must be made to the originator no later than 15 a	davs

Please attach a VOIDED check

before the effective date of the next transaction.



#### 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 Villas of Torino Community 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 <u>not</u> 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.

*****	********************
<u>Yes</u> □	I authorize Villas of Torino Community 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):
<u>No</u> □	I do not want to receive emails from Villas of Torino Community Association, Inc. and Watson Association Management.



### (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 V COMMUNITY ASSOCIATION. shown below, and hereby constitutes, appoints	
(Insert one owners name above)	
As the voting representative for the COMMUNITY unit owned by the by-laws of the Association.	said undersigned pursuant to
The voting representative is hereby authorized and empowered to a forth until the undersigned otherwise modifies or evokes the authorizente.	± •
Dated thisday of	, 20
Signature Signature – If jointly-owned, both owners	' signatures required)
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.