



## **Windy Pines Lease/Resale Checklist**

- Lease/Resale Application Page
- Vehicle Page
- Deed Restricted Page
- Pet page
- Email Consent form
- Authorization for Screening form
- Photo ID (must be legible)
- Maintenance Fee Options form (Sales)
- Disclosure Summary (Sales)
- Voting Certificate (Sales)
- Lease/Resale Contract
- Non-refundable Processing fee in the amount of \$125.00 payable to Watson Association Management
- Application fee in the amount of \$100.00 payable to Windy Pines HOA
- Background/Credit screening fee in the amount of \$35.00 per adult payable to Windy Pines HOA

**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**

**Thank you for your Cooperation!**

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



## Applicant Criteria for Residence at Windy Pines III & IV

*Windy Pines III & IV requires that all residents, tenants and owners must complete and pass an application approval process that includes a background and credit check.*

*The Board of Directors has established minimum criteria for applicants. Any applicant that does not meet the following standard will not be accepted for residence at Windy Pines III & IV.*

*The following is the minimum criteria which must be met to be considered as a resident, tenant or owner of a unit in Windy Pines III & IV.*

- *A FICO Credit Score of not less than 650.*
- *No convictions (misdemeanor or felony) for any sexual offense.*
- *No felony convictions for any federally described violent crime.*
- *No felony convictions for sale and/or distribution of illegal drugs.*
- *No evictions from any residential or living facilities.*

*The Board of Directors has enacted these minimum requirements to safeguard the quality of life and value within our community and reserve the right to reject any applicant for reasons including but not limited to those outlined in this document.*

*I acknowledge receipt, from my Seller/Lessor, of a copy of the Rules and Regulations (and Homeowners Association documents, if applicable). I understand and agree to the fact that I will be residing in a Homeowners Association and am obligated to abide by the laws of the Windy Pines Community and consent to the right of the Windy Pines Homeowners Association to enforce those laws and assess fines for violation(s). I understand that if I am accepted as an owner/lessee, this application will become part of my Association documents/lease.*

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

## LEASE/RESALE APPLICATION

Date: \_\_\_\_\_ Property Address: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Phone/Cell #: \_\_\_\_\_

Co-Applicant Name: \_\_\_\_\_ Phone/Cell #: \_\_\_\_\_

**Current Mailing address:** \_\_\_\_\_

(Address, City, State & Zip)

Any other Occupants? \_\_\_\_\_ If Yes, list names, age and relationship:

Name \_\_\_\_\_ Relation \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Relation \_\_\_\_\_ Age \_\_\_\_\_

Any additional occupant over 18 must submit an authorization for screening form with the screening fee of \$35.00 payable Windy Pines HOA

**Do you intend to:**

- Live in the home as a primary residence
- Maintain the home as a secondary residence
- Offer the unit as a rental

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 WINDY PINES III & IV HOA, INC., A COPY OF WHICH I HAVE RECEIVED FROM SELLER.

(IF SELLER FAILS TO PROVIDE A SET OF DOCUMENTS TO BUYER, 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

## VEHICLE INFORMATION

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### **DESCRIPTION OF VEHICLE:**

#### VEHICLE #1:

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_  
 Color: \_\_\_\_\_ Gross Weight: \_\_\_\_\_ VIN: \_\_\_\_\_  
 Vehicle Tag: \_\_\_\_\_ State: \_\_\_\_\_

#### VEHICLE #2:

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_  
 Color: \_\_\_\_\_ Gross Weight: \_\_\_\_\_ VIN: \_\_\_\_\_  
 Vehicle Tag: \_\_\_\_\_ State: \_\_\_\_\_

Vehicle 1 registered to: \_\_\_\_\_  
 Vehicle 2 registered to: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

\*\*\*ALL INFORMATION ON THIS FORM MUST BE COMPLETED

\*\*\*NO TRUCK OR VAN, BOAT, TRAILER, RECREATIONAL VEHICLE OR COMMERCIAL VEHICLE SHALL BE PARKED, STORED OR OTHERWISE KEPT ON ANY PORTION OF THE PROPERTY EXCEPT IN THE GARAGE.

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

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Signature Date

**IF MORE THAN 2 VEHICLES – USE ADDITIONAL FORM**

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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 WINDY PINES III & IV HOA, INC., a copy of which I/We have  
received from the owner.

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Buyer/Lessee  
Signature \_\_\_\_\_ Date: \_\_\_\_\_

Buyer/Lessee  
Signature \_\_\_\_\_ Date: \_\_\_\_\_

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

- No pets shall be kept, bred, or maintained for any commercial purpose.
- Household pets shall always whenever they are outside a home be confined on a leash held by a responsible person. Household pets shall mean dogs, cats and other animals expressly permitted by the Association.
- 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.

Pet(s)? Yes \_\_\_\_\_ No \_\_\_\_\_

<u>Type/Breed</u>	<u>Color/Name</u>	<u>Weight</u>

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ 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 Windy Pines III & IV HOA, 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 Windy Pines III & IV HOA, 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 Windy Pines III & IV HOA, Inc. and Watson Association Management.

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**A SEPARATE AUTHORIZATION FORM IS REQUIRED FOR EACH APPLICANT.  
FEE: \$35.00 per adult applicant, made payable to Windy Pines HOA**

**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 Windy Pines III & IV HOA, 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 Windy Pines III & IV HOA, 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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## MAINTENANCE FEE PAYMENT OPTIONS

- Option 1:** Coupons (for mailing payments):

*or*

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

Association Name: Windy Pines HOA

Account Number \_\_\_\_\_

I (we) hereby authorize Alliance Association 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 Windy Pines III & IV Homeowners' Association, Inc.

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.
3. You will be obligated to pay maintenance assessments to the association. Assessments may be subject to periodic change. The current amount is **\$124.00** per quarter.
4. You may also be obligated to pay any special assessments that may be imposed by the association.
5. You will be obligated to pay a Capital Contribution to Windy Pines III & IV HOA equal to 25% of annual Assessments upon acquiring title. The current amount that will be collected is **\$124.00**. This fee is not to be construed as an advancement of HOA fees.
6. You may be obligated to pay a special assessment to the respective municipality, county, or special district. All assessments are subject to periodic change.
7. Your failure to pay any of these assessments could result in a lien on your property.
8. 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.
9. 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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**(SALES ONLY)**

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***VOTING CERTIFICATE***  
***Windy Pines III & IV HOA, Inc.***

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Know all men by these present, that the undersigned is the record owner (s) in Windy Pines III & IV HOA, Inc. shown below, and hereby constitutes, appoints and designates:

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**(Insert one owners name above)**

As the voting representative for the HOMEOWNERS ASSOCIATION 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\_\_\_\_.

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**Signature**

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

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**Signature**

Property Address \_\_\_\_\_

Port St. Lucie, FL 34986

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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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