



Callaway Place Application Check List

- Resale Application Page
- Vehicle Page
- Pet Page
- Deed Page
- Email Authorization Form
- Voting Certificate
- Resale Contract
- Non-refundable Processing Fee \$125.00 or \$150.00 RUSH (less than 2 weeks) payable to Watson Association Management

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

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

www.WatsonAssociationManagement.com

8.22.22



Association Management

RESALE APPLICATION

Property Address: _____ Date: _____

INFORMATION CONCERNING APPLICANT(s):

Applicant Name: _____ Phone: _____

Co-Applicant Name: _____ Phone: _____

Present Address: _____

Other occupants: Yes ___ No ___

Name _____ Relationship _____ Age _____

Name _____ Relationship _____ Age _____

Do you intend to:

- Live in the home as a primary residence
- Maintain the home as a secondary residence

Applicant Employer _____ Phone _____ Title _____

Number of years _____ Address _____ Supervisor _____

Co-Applicant Employer _____ Phone _____ Title _____

Number of years _____ Address _____ Supervisor _____

EMERGENCY CONTACT PERSON _____

Phone _____ Address _____ Relationship _____

I (we) fully authorize investigation of all answers and references given.

If seller fails to provide a set of Documents to Buyer, a copy may be obtained from Watson Association Management, LLC at a cost of \$50.00.

Purchaser: _____ Date: _____

Purchaser: _____ Date: _____

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

- 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.
- The Board can revoke the privilege of having a pet on the property.

Pet(s)? Yes _____ No _____ Please sign and return if no pets

Pet Type: _____ Weight: _____ Age: _____ Color: _____ Sex: _____
Name: _____

Pet Type: _____ Weight: _____ Age: _____ Color: _____ Sex: _____
Name: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

This form is REQUIRED, if no pets please mark "NO" above

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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 & Regulations of CALLAWAY PLACE ASSOCIATION, INC., I (we) received a copy from the 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 Signature: _____ Date: _____

Buyer 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 consent. By completing, signing, and returning this form, you are authorizing the Board of Directors of Callaway Place 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 Callaway Place Association, Inc.

Yes

I authorize Callaway Place Association, Inc. and Watson Association Management to email me appropriate meeting notices, agendas, reports, violation letters and other information.

Email Address: _____

Unit Address: _____

Phone Number(s): _____

Signature(s): _____

Printed Name(s): _____

No

I do not want to receive emails from Callaway Place Association, Inc. and Watson Association Management.

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VOTING CERTIFICATE
Callaway Place Association, Inc.

Know all men by these present, that the undersigned is the record owner (s) In Callaway Place Association, Inc. shown below, and hereby constitutes, appoints and designates:

(Insert one owners name above)

As the voting representative for the HOMEOWNERS ASSOCIATION 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

Signature

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

Property Address _____

Port St. Lucie, FL 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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