

Palmira Golf and Country Club Master Homeowners Association

Please send all paperwork, payments, etc to:

KEB Management Services
6017 Pine Ridge Road #262
Naples, FL 34119
239-262-1396 phone
239-444-1191 fax

APPLICATION FOR APPROVAL TO PURCHASE

To: The Board of Directors of Palmira Golf & Country Club MHOA, Inc.

RE: _____ address & unit

() I (we) hereby apply for approval to purchase unit _____ in Palmira Golf & Country Club and for membership in the Association.

In order to facilitate consideration of this application, I (we) represent that the following information is factual and true, and agree that any falsification of misrepresentation of the facts in this application will justify its automatic rejection. I (we) consent to your further inquiry concerning this application, particularly of the references below.

PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION:

- 1. Full name of applicant _____
- 2. Full name of spouse _____
- 3. Home Address _____
- 4. Home Phone _____ Work Phone _____
- 5. Citizen of U.S.? Self _____ Spouse _____
- 6. Nature of Business or Profession _____

_____ If retired, former Company or Firm Name _____

- 7. Position held _____
- 8. Business Address _____
- 9. The documents of Palmira Master Association, Inc. provide an obligation of the unit owners that all units are for single family residence only. Please state name, relationship and age of all other persons who will be occupying the unit regularly.

NAME	RELATIONSHIP	AGE
_____	_____	_____
_____	_____	_____
_____	_____	_____

- 10. Three personal; References (local if possible):
Name _____ Address _____
City/State _____ Zip _____ Phone _____

Name _____ Address _____
City/State _____ Zip _____ Phone _____

Name _____ Address _____
City/State _____ Zip _____ Phone _____

11. Bank reference _____
12. Have you ever been convicted of a felony or crime involving violence to persons or property _____
If so, give details _____
13. Person to be notified in case of emergency _____
Address _____ Phone _____
14. Make of car _____ Year _____ Tag# _____ State _____
Make of car _____ Year _____ Tag# _____ State _____
15. Mailing address for notices connected with this application:
Name _____ Address _____
City/State _____ Zip _____ Phone _____
16. **If this transaction is a sale:** I am purchasing this unit with the intention to : (1) reside here on a Full-time basis; (2) reside here part-time; (3) lease the unit. (Please circle the number(s) that apply **I (we) will provide the Association with a copy of our recorded deed within 10 days of closing.**
17. I am aware of, and agree to abide by the Declaration of Palmira Golf and Country Club MHAO Association, Inc. the Articles of Incorporation, By-Laws and any and all properly promulgated rules and regulations in effect within the terms of my (our) occupancy ownership. I acknowledge receipt of a copy of the Association rules.
18. I understand and agree that the Association, in the event a unit is leased, is authorized to act as the owner's agent, with full power and authority to take whatever action may be required, including eviction, to prevent violations by lessees and their guests, of provisions of the Declarations and the rules and regulations of the Association.
19. **Any changes to the exterior of the home, to include lawn decorations, must meet approval of the ARC.**
20. **All dogs must be leashed when on property and dog waste must be picked up.**

The Association office will advise the prospective purchaser or lessee within a 30 (thirty) day period from the date of receipt of this application, whether this application has been approved.

Dated _____ Applicant Signature _____
Applicant Signature _____

A check for \$75.00, PAYABLE to KEB Management Services, LLC., must accompany this application, for the purpose of defraying costs of checking references, credit investigation, directory updating, and other expenses related to the processing of this application.

APPLICATION APPROVED _____ DISAPPROVED _____
DATE _____
BY: _____
Officer, Director or Manager