

**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  
239-262-5947 fax

NEW OWNER APPLICATION

RE: \_\_\_\_\_ address (& unit if applicable)

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

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 \_\_\_\_\_  
E-Mail \_\_\_\_\_  
If retired, former Company or Firm Name \_\_\_\_\_
7. Position held \_\_\_\_\_
8. Business Address \_\_\_\_\_
9. Please state name, relationship and age of all other persons who will be occupying the unit regularly.

NAME

RELATIONSHIP

AGE

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

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 MHOA, 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.**

Dated \_\_\_\_\_

Applicant Signature \_\_\_\_\_

Applicant Signature \_\_\_\_\_

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