

VILLAGGIO RESERVE MASTER PROPERTY OWNERS ASSOCIATION, INC.
C/O GRS MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD., SUITE 309
LAKE WORTH, FL 33463
P 561-641-8554 F 561-641-9448

PURCHASE APPLICATION

- 55 & OVER COMMUNITY
- COMPLETED APPLICATION REQUIRED
- TRANSFER FEE OF \$50.00 PAYABLE TO VILLAGGIO RESERVE MASTER POA
- ADMINISTRATIVE/SCREENING FEE OF \$115.00 PAYABLE TO GRS MANAGEMENT ASSOCIATES PER APPLICANT
- COPY OF CONTRACT REQUIRED
- COPY OF DRIVERS LICENSE REQUIRED
- BACKGROUND CHECK REQUIRED
- CERTIFICATE OF APPROVAL REQUIRED

IF NEEDED:

COMMUNITY DOCS ARE \$75.00 PAYABLE TO GRS MANAGEMENT ASSOCIATES, INC.

VILLAGGIO RESERVE MASTER POA

LEASE/RENTAL

1. Sellers must be current with all maintenance and assessments prior to approval of any sale or transfer. All past debts, obligations, fines and assessments must be satisfied on or before an application will be processed.
2. Buyer will submit completed application and all fees made payable to appropriate parties prior to the execution of a sale or transfer. Such application will include affidavit for age and authorization to conduct background check by an independent agency.
3. The Association will have thirty (30) business days to approve the sale or transfer of a home and such approval shall be in writing and in recordable form, signed by any two (2) officers of the HOA and shall be sent to the current homeowner and agent working on the current homeowner's behalf. If the HOA does not make a final rendering regarding the sale or transfer of a home within the thirty (30) business day period, then the sale or transfer of a Home shall be deemed approved. Applications that are rejected will be returned to the homeowner.
4. Seller must supply Purchaser with copies of the current Villaggio Reserve documents and Rules and Regulations.
5. A staff member will meet with the new owner to ensure that they have all current documents for the community and an introduction to the community.
6. The purchaser of a home may not lease/rent their property for a period of one year after the date of transfer of title.
7. Homeowners allowing other family members to reside in their property (without the homeowners present) for more than thirty (30) days shall complete an affidavit stating such.
8. The Board of Directors shall have the right to make hardship exceptions to any of these Rules and Regulations. These would be decided confidentially and on a case-by-case basis.

VILLAGGIO RESERVE MASTER PROPERTY OWNERS ASSOCIATION, INC.
C/O GRS MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD., SUITE 309
LAKE WORTH, FL 33463
P 561-641-8554 F 561-641-9448

INSTRUCTIONS FOR APPLICATION FOR SALE OR TRANSFER OF TITLE

The following items are required for the processing of any sale or transfer of title application.

1. Complete and sign application. Application will not be processed until fully complete.
2. Attach a \$50.00 non-refundable transfer fee, made payable to Villaggio Reserve Master POA.
3. Attach a \$115.00 non-refundable administrative/screening fee per applicant, made payable to GRS Management Associates.
4. Completion of an age verification affidavit stating that at least one of the proposed occupants will be at least age fifty five (55) or older. Please note that no one under the age of 19 is permitted to reside for longer than sixty (60) days per calendar year.
5. Completion of Future Owner/Lessee Information Sheet.

**VILLAGGIO RESERVE MASTER PROPERTY OWNERS ASSOCIATION, INC.
C/O GRS MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD., SUITE 309
LAKE WORTH, FL 33463**

APPLICATION FOR LEASE

ADDRESS OF UNIT: _____ Current Phone No. _____

Last Name First Name Middle Birth Date

Social Security No. Driver's License No. State of License

Marital Status: Single _____ Married _____ Separated _____

Co-Applicant Last Name First Name Middle Birth Date

Social Security No. Driver's License No. State of License

Expected move in date

Will the above listed person(s) be the only occupants? _____ Yes _____ No

If No, list other occupants with Date(s) of Birth below:

NUMBER OF OCCUPANTS TO LIVE IN RESIDENCE

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

**VILLAGGIO RESERVE PROPERTY OWNERS ASSOCIATION, INC.
C/O GRS MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD., SUITE 309
LAKE WORTH, FL 33463**

RESIDENCE HISTORY

Current Address	City, State, Zip		
Area Code/Phone Number	Own	Rent	How Long?
Name and Address of present landlord or mortgage co.	Area Code/Phone Number	Monthly payment	
Previous address (include landlord and apt community)	Area Code/Phone Number	How Long?	

EMPLOYMENT HISTORY

Applicant employed by	Supervisors Name	How Long?
Address	Area Code/Phone Number	
Position Held	Salary	Per Hour/Week/Bi-Weekly/Monthly
Co-Applicant Previously Employed by	Supervisors Name	How Long?
Address	Area Code/Phone Number	
Position Held	Salary	Per Hour/Week/Bi-Weekly/Monthly

**VILLAGGIO RESERVE MASTER PROPERTY OWNERS ASSOCIATION, INC.
C/O GRS MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD., SUITE 309
LAKE WORTH, FL 33463**

ADDITIONAL INCOME

Sources	Amount per year
---------	-----------------

PET INFORMATION

No breeds commonly recognized as aggressive are permitted. No more than two pets are permitted.

Type of Pet (Dog/Cat/Bird/Fish)	Breed	Color	Weight
---------------------------------	-------	-------	--------

Type of Pet (Dog/Cat/Bird/Fish)	Breed	Color	Weight
---------------------------------	-------	-------	--------

PALM BEACH COUNTY RABIES LICENSE TAG NUMBER

(Required by Palm Beach County Ordinance 98-22)

VEHICLE INFORMATION

Commercial vehicles, horse trailers, RVs, Motor homes, boat trailers etc, are not permitted to be parked on the street or driveway or on common property including parking lots but are permitted to be garaged with door closed as per current documents.

Vehicle Make	Model	Year	Color	Tag
--------------	-------	------	-------	-----

Vehicle Make	Model	Year	Color	Tag
--------------	-------	------	-------	-----

Vehicle Make	Model	Year	Color	Tag
--------------	-------	------	-------	-----

Have you ever been convicted of any criminal activity? _____
Please list all:

VILLAGGIO RESERVE MASTER PROPERTY OWNERS ASSOCIATION, INC.
C/O GRS MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD., SUITE 309
LAKE WORTH, FL 33463

ACKNOWLEDGEMENTS

In order to facilitate consideration of my notice for lease, of a home in Villaggio Reserve located in Delray Beach, FL, I/We represent that the above information provided is true and accurate. Should the above information be proven false or inaccurate, I/We understand and agree to accept that my/our application shall be automatically rejected.

I/We consent that you may make further inquiry concerning the undersigned and my/our representations, including criminal background investigations.

I/We release Villaggio Reserve from all liability arising from the investigation of my/our background(s) and consideration of any information received.

I/We will not occupy the Lot, nor make any final arrangements for occupancy, until I/We am/are notified by Association that my/our application has been approved. I/We understand the Association has **thirty (30) business days** upon receipt of a fully completed application to make such determination, as provided under Article XI of the Declaration of Covenants, Conditions, Restrictions and Easements for Villaggio Reserve (“Declaration”)

I/We understand that children nineteen (19) years of age or younger may not occupy a dwelling unit, for a period over sixty (60) calendar days within a year. Proof of age must be provided for each and every occupant.

If my/our application is approved, I/We agree to abide by all covenants governing the property and the Rules and Regulations, including but not limited to the following:

1. I/We shall abide by all terms and provisions of the recorded Declaration and the Rules and Regulations promulgated by the Association. If I/We have not been provided with a copy of the governing documents by the owner, I/We acknowledge it is my/our responsibility to request copies of these documents from the Association, subject to reasonable copying charges.

 2. In the event I/We violate any term or provision of the recorded Declaration and the Rules and Regulations promulgated by the Association, I/We acknowledge that I/We shall be in breach of our Lease Addendum and the Association shall have the right to institute eviction proceedings against me/us, at my/our sole expense.
-

Signature of Applicant

Date

Signature of Applicant

Date

VILLAGGIO RESERVE MASTER PROPERTY OWNERS ASSOCIATION, INC.

AGE VERIFICATION CERTIFICATE

The following information must be furnished by the owner or owners of each residence so that the Association may monitor the percentage of residences occupied by at least one person 55 years of age or older in order to preserve the status of Villaggio Reserve as a community of housing for older persons in accordance with Villaggio Reserve documents and the Federal Fair Housing Act.

LOT# _____ Address _____

Owner(s) as appear in the last recorded deed:

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Occupant(s) {Include owner(s) above if occupant(s)}

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

The undersigned certify that the above information is true and correct and that within fifteen (15) days after any changes thereof the undersigned will notify the Board of Directors of Villaggio Reserve of such change in writing.

OWNER SIGNATURE

DATE

OWNER SIGNATURE

DATE

VILLAGGIO RESERVE MASTER PROPERTY OWNERS ASSOCIATION, INC.

FUTURE OWNER/LESSEE INFORMATION SHEET

Please provide the following information so that the Homeowners Association will be able to contact you before your closing or lease begins.

Property Purchasing/Leasing Address

Future Owner/Lessee Name(s)

Address that you can be reached at before your closing/occupancy

E-mail Address: _____

Phone Number(s) that you can be reached at before closing/occupancy

Home: _____ Cell: _____

Your Real Estate Agent Information

Name: _____ Phone: _____

E-mail Address: _____

Expected Closing Date: _____

OR

Lease Term Starting Date: _____ Ending Date: _____