

KINGS LAKE HOMEOWNERS ASSOCIATION, INC.
c/o Seacrest Southwest
1044 Castello Dr., Suite #206
Naples, Florida 34103-1900
(239) 261-3440

APPLICATION FOR APPROVAL TO PURCHASE OR TRANSFER

TO: The Board of Directors of Kings Lake Homeowners Assoc., Inc.

I/We hereby apply for approval to purchase or transfer Single family lot address at,

_____ or, unit # _____ in _____ Condominium, in Kings Lake, a Homeowners Association, and for membership in the Homeowners Association. This property is being purchased/transferred from, (current owner), _____.

Please provide mailing address and phone number for notices connected with this application:

Name _____ Address _____
City _____ State _____ Zip _____ Phone number _____

In order to facilitate consideration of this application, I/We represent that the following information is factual and correct and agree that any falsification or misrepresentation in this application will justify its disapproval. I/We consent to your further inquiry concerning this application. Applicant should submit this application along with an **administrative processing fee of \$150.00 for a single family home. For a condominium an administrative processing fee of \$75.00. Please make check payable to Seacrest Southwest Property Management**, and mail to the address above for approval in no less than 30 days prior to scheduled closing.

Please note that an incomplete or illegible application will cause a delay in processing.

Part 1 PROPERTY OWNER INFORMATION

Full name of applicant, First name _____ Last name _____

Full name of spouse/partner, First name _____ Last name _____

Residence/Mailing Address _____
State _____ Zip _____

Kings Lake unit address _____

Contact phone number _____ Cell _____ Home _____ Other _____

Email _____

I hereby agree to electronic notification for all Association business.

Initials _____

If name of owner is other than a natural person, state the name of responsible party.

Name _____ 24-hr phone number, cell _____ home _____ other _____

Address _____ email _____

I am purchasing/transferring ownership of this unit with the intention to, (must check one).

() Reside here on a full time basis () Reside here part time () Rent or lease unit

Part 2 PRIMARY OCCUPANT INFORMATION

The documents of Kings Lake Homeowners Assoc, Inc. provide an obligation of unit owners to provide information regarding who is in occupancy, at all times. Please state name, relationship, and age of all persons who will be occupying the unit on a regular basis.

First name _____ Last name _____ Age _____

Driver's License number, expiration date and State issued _____

Contact phone number _____ Cell _____ Home _____ Other _____

Full name of spouse/other, First _____ Last _____ Age _____

Contact phone number _____ Cell _____ Home _____ Other _____

Driver's License number, expiration date and State issued _____

State the names and relationships of all other persons who will occupy the residence

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

Part 3 VEHICLE INFORMATION

List all vehicles that will be parked at the residence. Passenger vehicles only, no boats, commercial vehicles or RVs are permitted.

Make/Model _____ Year _____ Color _____ Plate# _____ State _____

Make/Model _____ Year _____ Color _____ Plate# _____ State _____

Make/Model _____ Year _____ Color _____ Plate# _____ State _____

Part 4 GOVERNING DOCUMENTS

I/We understand that this property is part of a Deed Restricted Homeowners Association and agree to abide by the Articles of Incorporation, Bylaws, Protective Covenants and all Rules and

Regulations of Kings Lake Homeowners Association, Inc. All documents are available on our website: kingslake.today

Part 5 HOA RULES AND REGULATIONS

Applicant hereby acknowledges that they have received and read a copy of the Association Rules and Regulations, (attached below), and agree to abide by them. Applicant understands the necessary confidential information will remain confidential by the Home Owners Association’s Officers and/or Property Manager. Applicant declares the foregoing information to be true and correct. Applicant understands the application fees are non-refundable.

Part 6 AUTHORIZATION

Kings Lake HOA hereby authorizes Seacrest Southwest Property Management to verify all information contained on the application and conduct a background check of prospective applicants. (In the case of a condominium or villa, the sub association will conduct the background check.) They are authorized to accept and approve this application unless findings cause the application to be sent to the Kings Lake Board for review. Applications shall be reviewed for approval within 30 days.

Applicant signature _____ Date _____

Applicant signature _____ Date _____

This application has been designed for the purpose of protecting our current property owners. It is the desire of the Association to welcome you to our beautiful family-oriented community.

FOR AN APPROVAL TO BE ISSUED, THIS COMPLETED APPLICATION AND A LEGIBLE COPY OF THE COMPLETE SALES CONTRACT OR TITLE TRANSFER DOCUMENTATION MUST BE RETURNED NO LESS THAN THIRTY (30) DAYS PRIOR TO CLOSING:

Seacrest Southwest Property Management
Attn: Sales and Lease Dept.
1044 Castello Dr., Suite #206
Naples, Fl. 34103

ACTION TAKEN BY BOARD OF DIRECTORS

_____ Approved _____ Disapproved _____ Date _____

By: Board Member or authorized agent

_____ Office _____

ANY APPROVAL IS VOID IN THE EVENT OF FALSE STATEMENT IN THE ABOVE APPLICATION.