

CAMILLE GARDENS NO. 6 RESIDENTIAL PURCHASE POLICY AND RULES

1. The prospective purchaser's application and required information shall be submitted to the Camille Gardens No.6 not less than (30) thirty days in advance of the purchase date.
2. The Owner, or his/her agent, shall submit a completed Resale Application form that is available from the Camille Gardens No. 6, management company or (down-loadable document in pdf form from www.dzigrossibc.com), together with the \$100.00 pre-paid non-refundable application fee, a minimum of thirty days in advance of the purchase and prior to moving forward with estoppel requests, showing the following:
 - a) The name and previous address of the purchaser;
 - b) Contact Information; i.e. phone number(s); emergency contact and/or references;
 - c) The name, date of birth, social security number, driver's license of all adults 18 years or older who will reside at the premises;

The Board of Directors or designee by majority vote may disapprove the purchase for Good Cause if a person is a convicted felon, is on the Sexual Offender List or on the Police Sexual Predator list. Misdemeanor convictions pertaining to Domestic Battery will be deemed as good cause, and may result in disapproval.

Camille Gardens No. 6 shall not violate the **Fair Housing Act** that is a federal law that prohibits discrimination in home sales, financing, and rentals based on race, color, religion, sex or national origin. In Florida, Fla. Stat. §§ 760.20-760.60 also prohibits discrimination based on race, color, national origin, sex, disability, familial status or religion.

**CAMILLE GARDENS NO. 6
RESALE APPLICATION CHECKLIST**

PURCHASER NAME(S) _____

PROPERTY ADDRESS: _____ UNIT # _____

- () Completed and signed CAMILLE GARDENS NO. 6 **RESALE APPLICATION** and the \$100.00 pre-paid (non-refundable) application/ processing fee is required at the time of submission. Make checks or money orders payable to: Camille Gardens No. 6
- () Completed and signed BACKGROUND CHECK CONSENT form for each individual who will reside in the residence 18 years or older. **Canada or states that do not report to the Nation-wide database may be subject to a small increase in cost and a longer than normal turn-around time for background check completion.
- () Funds for the Resale Application Processing fee and background check(s) must be in the form of a money order or cashier's check or check and made payable to: Camille Gardens No. 6 and be accompanied by a COPY OF THE FULLY EXECUTED PURCHASE CONTRACT.

Please include a CLEAR copy of a driver's license for all applicants to ensure a smooth process.
All paperwork must be completed and signed prior to submission for approval; and, submitted to the: Camille Gardens No. 6 - P.O. Box 191, Lehigh Acres, FL 33970.

PLEASE NOTE: ALL VEHICLES MUST BE IN THE SPACE PROVIDED BY THE ASSOCIATION.

Who/Where should we notify you when approved? _____

(Owner, Realtor, or Management for address)

Phone: _____

Email: _____

PROPERTY MANAGER CHECKLIST:

DATE APPLICATION RECEIVED: _____ INITIALED: _____

APPLICATION FEE RECEIVED : _____

BACKGROUND CHECK ORDERED: _____ BACKGROUND CHECK RECEIVED: _____

BOARD REVIEW DATE: _____

APPROVED _____ DENIED _____ INITIALED: _____

COMMENTS: _____

CAMILLE GARDENS NO. 6 RESALE APPLICATION

PROPERTY ADDRESS: _____, Unit # _____

CURRENT

OWNER: _____ PHONE: _____ Email: _____

This application must be submitted to the Camille Gardens No. 6, P.O. Box 191, Lehigh Acres, FL 33970 at least 30 days prior to the start of any purchase along with a copy of the fully executed Sales Contract and a \$100 pre-paid (non-refundable) application fee made payable to: Camille Gardens No. 6.

NAME OF PURCHASER (1): _____ DOB: _____ Driver's

License#: _____

PRESENT ADDRESS: _____

PHONE: _____ How long: _____ Own: _____ Rent: _____

Email: _____

NAME OF PURCHASER (2): _____ DOB: _____ Driver's

License#: _____

PRESENT ADDRESS: _____

PHONE: _____ How long: _____ Own: _____ Rent: _____

Email: _____

ADDITIONAL OCCUPANT

_____ RELATIONSHIP _____ AGE _____

ADDITIONAL OCCUPANT

_____ RELATIONSHIP _____ AGE _____

PLEASE PROVIDE VEHICLE INFORMATION

MAKE/MODEL: _____ YEAR: _____ STATE: _____ TAG#: _____

MAKE/MODEL: _____ YEAR: _____ STATE: _____ TAG#: _____

CREDIT AND PERSONAL HISTORY

HAVE YOU EVER FILED FOR BANKRUPTCY _____ HAVE YOU EVER BEEN EVICTED? _____

ARE YOU CURRENTLY A PARTY TO A LAWSUIT? _____ ARE THERE ANY JUDGMENTS AGAINST YOU? _____

PLEASE EXPLAIN ANY YES ANSWERS:

OWNERS' ACKNOWLEDGMENT AND CONSENT

The prospective purchaser/owners of the unit acknowledge that they are be responsible and liable for any and all violations by their tenants, licensees, invitees or guests, and by the guests, licensees and invitees of their tenants, at any time. Owners further agree that in the event there is a default as a result of a breach of any condominium rules, regulations or covenants that the Owners shall take immediate steps to terminate condition. Further, the Owners hereby agree to hold the Association and its Property Manager and background check company free, harmless and indemnified from any and all costs, damages, fees, and expenses of any kind whatsoever in connection with this proposed purchase.

Owner signature _____ Owner signature _____ Date _____

APPLICANTS ACKNOWLEDGE, AGREE TO AND CONFIRM:

THAT THEY UNDERSTAND THAT CAMILLE GARDENS NO. 6 IS A DEED/AGE RESTRICTED COMMUNITY AND THAT ALL ARE SUBJECT TO THE TERMS AND CONDITIONS OF THE GOVERNING DOCUMENTS FOR CAMILLE GARDENS NO. 6, THAT THEY HAVE RECEIVED A COPY OF THE RULES AND REGULATIONS FOR THE COMMUNITY PERTAINING TO THE PROPERTY.

AT NO TIME SHALL ANY PERSON WHO IS REQUIRED TO BE REGISTERED AS A SEXUAL PREDATOR/OFFENDER UNDER THE LAWS OF ANY STATE OR COUNTRY BE ALLOWED TO STAY OVERNIGHT.

APPLICANT'S SIGNATURE: _____ DATE, _____

APPLICANT'S SIGNATURE: _____ DATE, _____

CAMILLE GARDENS NO. 6 BACKGROUND CHECK CONSENT

APPLICANT AUTHORIZATION:

I, the undersigned, authorize the Camille Gardens No. 6 and its Property Management Company or background check company to obtain an investigative consumer report including but not limited to a criminal record search and registered sexual offender search. I authorize the release of information from previous or current landlords, employers and bank representatives. This information is for resident screening purposes only and is confidential. This information will be compiled from sources believed to be reliable but the accuracy of which cannot be guaranteed. I hereby hold the Camille Gardens No. 6, its property management company and its agents free and harmless of any liability for any damages arising out of any improper use of this information.

Applicant's Signature: _____ Date: ____/____/____

APPLICANT INFORMATION:

Applicant's Name: _____ SS # _____

Birth Date: ____/____/____ Driver's Lic. #: _____ Phone: _____ Cell: _____

***** Residential History *****

Present address: _____ City: _____ County: _____ St: _____ Zip: _____

Landlord/Owner: _____ Telephone: _____

Past address: _____ City: _____ County: _____ St: _____ Zip: _____

Landlord/Owner: _____ Telephone: _____

Vehicle Information: Make & Model: _____ License: _____

Make & Model: _____ License: _____

Have you ever declared bankruptcy? _____ if so, when? _____

Have you ever had an eviction filed against you? _____ if so, please specify _____

Have you ever been charged with a felony? _____ if so, please specify _____

Have you ever been charged with a misdemeanor? _____ if so, please specify _____

Have you ever refused to pay rent/ broken a lease? _____ if so, when and why _____

I, the undersigned applicant, affirm the information contained on this application is true and correct and authorize Florida Tenant Reporting Services, Inc. to verify all information contained in this application. Misstatements can be deemed reason for denial of occupancy. I also understand that this application is the property of Florida Tenant Reporting Services.

Applicant's Signature: _____

Date: ____/____/____

Camille Gardens No. 6
a 55+ older Community Condominium Association
Rules & Regulations
Approved by the Board of Directors

An **applicant interview is required** for all prospective purchaser(s) prior to occupancy shall occur. To All Unit Owners, this is a 55 Plus Community with 80% Owner Occupied and 20% Rental Limit 18 to 55

This is to inform you that the Condo Rules have been reviewed by the Board of Directors and are up to date.

1. The maintenance fee for all condo owners is \$105.00 per month (subject to change annually) and due on the first of each month. A Lien may be placed against the property when arrears extend beyond 60 days.
2. No minors under the age of 18 are permitted to be permanent residents.
3. Visitation of children is limited to four weeks.
4. No boats, trailers or motor homes are permitted on the property. Visitors driving motor homes must park on Glendale Ave.
5. Circular clothes lines between houses only.
6. No business signs allowed on the property or business signage on vehicles when parked overnight.
7. Unit Owners shall not permit their premises to be used in any manner that is a disturbance to or a nuisance to others.
8. No parking is allowed on the grass. It is also the owners responsibility to inform your guests of this rule.
9. No storage sheds larger than 4x6 plastic or neoprene sheds and carports cannot be used as a storage place. The carport is not to be used for storage of excess furniture etc.
10. Each owner is responsible for maintaining everything on his property which includes the roof, gutters, downspouts, post light bulb replacement, shrubs, trees and weeds that grow next to the condo. Lawn Maintenance, grass cutting, trimming of trees in the Common Area, weed cutting around drives and sprinklers are the associations responsibility.

11. House cats are allowed. Small dogs that are kept in the house and when walked must be cleaned up after by the owner. While the pet is outside it must be on a leash and not tied up and left to bark and upset unit owners.
12. An amount to be determined each year of the monthly maintenance fee is kept in reserve for painting and paving/seal-coating. If costs are in excess the reserves, unit owners will be accessed for the additional amount to cover this maintenance.
13. Owners only may screen in their front porch when a proper blueprint is approved by the association and a permit pulled on said construction. This must be done before construction begins. All others will be subject to a fine. It is up to the owner to make sure anything that was not pre-approved or permitted be removed.
14. Home owners who rent their units must do so for a period of at least 3 months. No weekly or monthly rentals are allowed. Renters have no say as to the way the association is run.
15. No fences or shrubs shall be erected between units without express permission of the Board of Directors.
16. In case of an emergency the President of the Association may enter the unit. If the President is unavailable and other member of the board can enter or allow emergency personnel to enter. Keys should be made available to the President for this purpose. If there is a problem with a key, please make sure that the President and the Treasurer have a contact number in case of an emergency.
17. There will be no use of neighboring unit's carports without express permission by the owner of the condo. Not more than two vehicles per unit are permissible at any time, excluding temporary visitors.

Camille Gardens No. 6

The undersigned certifies that the above Camille Gardens No. 6 rules and regulations are understood and agreed to, and will be obeyed by all residents and guests at:

(Address)

(Signature)

(Date)

(Signature)

(Date)