JACARANDA COUNTRY CLUB VILLAS ASSOCIATION, INC.

AN ADULT CONDOMINIUM ASSOCIATION - PROOF OF AGE REQUIRED c/o Sunstate Association Management Group P.O Box 18809, Sarasota, FL 34276

P: 941-870-4920/ F: 941-870-4920

Email: allapplications@sunstatemanagement.com

NOTICE OF INTENTION TO SELL UNIT

JACARANDA COUNTRY CLUB VILLAS ASSOCIATION

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Email: allapplications@sunstatemanagement.com and estoppels@sunstatemanagement.com

APPLICATION FOR PERMISSION TO PURCHASE

(Please Complete, Initial and Sign where requested and provide all required documentation)

Buyer:	Unit#: Date of Closing:
Telephone Number (for interview):	Email:
Address:	
Business Address & Company:	
No. of Children Living with You:Ages:	_
No. of Vehicles: Make & Model	Boat:
·	nakes, rabbits, hamsters, birds, etc. Maximum of 3 pets (2 dogs
	ype of Pets
Personal References:(List two with address and telep	none numbers)
Credit References:(List two with address and telephon	ne numbers)
Person to Notify in Case of Emergency:	Phone:
Purchaser's Mortgagee and Address, if any:	
Initial All	
MAXIMUM OCCUPANCY: 2 Bedroom	= 4 people: 3 Bedroom= 6 people
	ndominium documents and are aware of, and agree to abide by the
• •	ncorporation, By-Laws of Jacaranda Country Club Villas Association
Inc. and any and all other properly promulgate of my/our ownership.	ed rules and regulations and amendments in effect within the term
I/We, understand that the owner of t	he unit is responsible for roof maintenance including re-roofing.

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 Upon closing, if this application is according. 	epted, I/We will pro	ovide a copy of the Closing Statement and a
copy of the recorded Deed to provide a new o	wnership.	
All applications for permission to pure	chase must be appr	oved by the Board of Directors prior to the
closing date.		
 Attach a \$100.00 payment for the ap 	plication fee, made	payable to Jacaranda Country Club Villas
Association, Inc.		
	• .	
• • • •		
Provide driver's licenses or other productions.	of of age – 55 or old	ler.
Agents Name:	Phone	2:
Buyers Signature:	Co/Buyers Sign	ature
AUTHORIZATION TO RELEASE EMPLOYMENT, BAN		
Villas Association, Inc., Board of Directors and its agents S the information contained in this and the attached Application that the Board of Directors, Officers and Management of Die held harmless from any action or claim by me/us in investigation conducted by the Board of Directors.	cation for Occupancy Jacaranda Country Cl	Approval may be used in such investigation, and ub Villas Association, Inc., itself and its agents shall
I/We hereby authorize Jacaranda Country Club Villas Associations of the consumer reporting agencies in considering this application confidence. Upon applicant(s) request we will inform applicant from which we obtained a consumer report, if any, relating	n. I/We also understa icant(s) of the name a	and that any information will be held in strict
Under penalty of perjury, the undersigned certifies that th	e foregoing informat	ion is true and correct.
Signature of Applicant for Rental/Purchase		Date:
Printed Name:	DOB:	SS#
Signature of Applicant for Rental/Purchase		Date:
Printed Name:	DOB:	SS#

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Other occupants of Unit over the age of 18:

Legal Printed Name	Date of Birth	Social Security Number	Signature		
1.					
S.					
3.					
4.					
++++++++++++++++++++++++++++++++++++++					
ApprovedD	enied	Date:			
Board Signature		Title: — — — —			

AUTHORIZATION TO PERFORM BACKGROUND INVESTIGATION AND CRIMINAL REPORT

All occupants over age 18 must complete this form

In compliance with applicable state law, this notice is to inform you that this company may obtain a BACKGROUND PROFILE AND CRIMINAL report.

Reports include but are not limited to criminal background checks, Department of Motor Vehicle records, and associated profile information. An investigative report contains information of your character, general reputation, personal characteristics, or mode of living which has been obtained through public records and personal interviews with neighbors, friends, or associates or from others with whom you are or have been acquainted or who may have knowledge concerning and such information.

By signing below, I		, authorize this company to obtain a Criminal repor				
,	PRINT GIVEN NAME			, ,		•
or an investigative prof	ile report in connect	ion with my emp	oloyment,	or tenand	cy as set fo	rth herein.
x						
	SIGNATURE				DATE	
Full Legal Name:						
Social Security #		Date of Birth _	//	/	Y	
Current Address						
Driver's License:						
Or Passport	511070					

PHOTO ID REQUIRED

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Sunstate Management Group
 PO BOX 18809
 Sarasota FL 34276
 941) 870-4920 / {941) 870-9652 Fax

TO:	All Unit Owners			
FROM:	The Board of Directors			
RE:	Directory Authorization Form			
Name:			(Please print clearly)	
Name _			(Please print clearly)	
Unit# _		<u> </u>		
regulation distribu	ons, if you wish NOT to be include	d in the Association' ciation by checking	d Distribution List. Because ofnew State 's directory or on the Association's e-mail the box designated "Do not include my	
If you w	Do not include my information wish to be included in the Directory		ease fill in the information section below.	
• Mailir	Please include my information Address:			
• Altern	nate Mailing Address:			
Florid	a Land Phone:	Other Phone:		
Cell P	hone#!	_ Cell Phone #2		
- E-Mai	il Address:		(Print Clearly)	
	vish to have all Association mailing		nically, please check the box designated	
	Send all Association mailing	electronically.		
	agree to allow the information prov will be distributed to all residents.	rided above to be pul	blished in the new Association directory	
			FICAL CHANGE OF ADDRESS. EMAIL AT: kcweb@keys-caldwell.com	n.
Signed	:	Unit#	Date:	
Signed:	:	Unit#	Date:	

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Sunstate Management Group PO BOX 18809 Sarasota FL 34276 :941) 870-4920 / (941) 870-9652 Fax

NOTICE OF OWNER CONSENT TO WAIVE FIRE SPRINKLER RETROFIT REQUIREMENTS

THIS IS TO PROVIDE ·FORMAL NOTICE. that pursuant" to the authority of Section 718.112(2)(1), Florida Statutes, as · amended by Chapter 2010-174, Laws of Florida, the owners of not less than a majority of the Association's voting interests of Jacaranda Country Club Villas, a Condominium, which Declaration was- originally recorded at Officfal Records Book 1413, Page 1693, et·seq.·of the public Records.of Sarasota County, Florida, have consented to waive the requirement that the condominium property be retrofitted with a fire sprinkler system via written consent.

All unit owners are required by Section 718.112(2)(1). Florida Statutes, to provide a copy of this formal notice to a new owner prior to closing. This notice shall also be provided by the unit owner to a renter prior to signing a lease. Please maintain this notice with your other important condominium documents.

DATED this it day of $\underline{J};d_{-}/N\{ri,t]Jlr'$, 2016.

JACARANDA COUNTRY CLUB VILLAS CONDOMINIUM ASS_OCIATION, INC.

By: r = 1, r = 1 K61m s, r = 1