

**THIS SECTION TO BE COMPLETED BY PURCHASER OR RENTER.  
THE BOARD WILL NOT ACCEPT PARTIALLY COMPLETED FORMS**

FULL NAME OF PROSPECTIVE RESIDENT \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_

\_\_\_\_\_ PHONE # \_\_\_\_\_

SOC. SEC # \_\_\_\_\_ DRIVERS LIC & ST \_\_\_\_\_

EMPLOYER \_\_\_\_\_ PHONE # \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

OCCUPATION \_\_\_\_\_ LENGTH OF EMPLOYMENT \_\_\_\_\_

HAVE YOU EVER BEEN ARRESTED AND/OR CONVICTED OF A CRIMINAL OFFENSE? (FELONY,  
MISDEMEANOR, CIVIL OR TRAFFIC) YES \_\_\_\_ NO \_\_\_\_

IF YES, PLEASE GIVE DETAILS \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FULL NAME OF PROSPECTIVE RESIDENT \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_

\_\_\_\_\_ PHONE # \_\_\_\_\_

SOC. SEC # \_\_\_\_\_ DRIVERS LIC & ST \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

EMPLOYER \_\_\_\_\_ PHONE # \_\_\_\_\_

OCCUPATION \_\_\_\_\_ LENGTH OF EMPLOYMENT \_\_\_\_\_

HAVE YOU EVER BEEN ARRESTED AND/OR CONVICTED OF A CRIMINAL OFFENSE? (FELONY,  
MISDEMEANOR, CIVIL OR TRAFFIC) YES \_\_\_\_ NO \_\_\_\_

IF YES, PLEASE GIVE DETAILS \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

(We) ARE PURCHASING THIS UNIT WITH THE INTENTION TO (CHECK ONE)

\_\_\_\_ Reside as owners on a full-time basis

\_\_\_\_ Reside as owners as alternative residence

\_\_\_\_ Purchase with intent to lease

UNITS ARE FOR SINGLE FAMILY USE ONLY. THE NUMBER OF PERSON (S) THAT WILL OCCUPY THE UNIT IS \_\_\_\_\_

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

**PARKING:**

**NOTE: VEHICLES MUST BE PARKED IN THE DRIVEWAY OR IN THE GARAGE - STREET PARKING IS RESERVED FOR GUEST PARKING ONLY**

**PETS:**

**NOTE: PETS CANNOT NOT BE OVER 50 LBS.**

- MUST BE ON A LEASH AT ALL TIMES WHEN OUTSIDE
- ALL DEFICATION MUST BE PICKED UP, BAGGED, AND DISPOSED OF IN AN APPROPRIATE MANNER
- THE FOLLOWING PETS WILL OCCUPY THE UNIT: (LIMIT 2 PER HOUSEHOLD) "

\_\_\_\_\_  
\_\_\_\_\_

**AUTOMOBILE/VEHICLE INFORMATION:**

- ALL VEHICLES MUST BE PARKED IN THE GARAGE
- STREET PARKING IS NOT ALLOWED
- VEHICLES WITH SIGNAGE – SIGNAGE MUST BE COVERED
- LARGE TRUCKS, CAMPERS & RV's ARE NOT PERMITTED EXCEPT FOR LOADING AND UNLOADING
- PARKING ALLOWED ONLY IN THE DESIGNATED AREAS ON THE STREET (MAP ATTACHED
- NO WORKING ON VEHICLES IS ALLOWED ON PROPERTY
- PARKING IS PROHIBITED NEXT TO GRASSY AREAS AND 'NO PARKING' DESIGNATED AREAS

MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ YEAR \_\_\_\_\_ TAG # \_\_\_\_\_

MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ YEAR \_\_\_\_\_ TAG # \_\_\_\_\_

**PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE # \_\_\_\_\_

I (We) understand that any violation of the terms, provisions, conditions and covenants of the Vista Lake Howell Townhomes HOA Association, Inc. documents provide cause for immediate action as therein provided. Renters - violations could result in a lease agreement being terminated and eviction procedures being initiated.

Initials: \_\_\_\_\_

I understand that the Association may, pursuant to Section 943.053 Fla. Statutes, obtain criminal history information on the application. I hereby release Vista Lake Howell Townhomes HOA Association, Inc. and agent thereof from harm and authorize them to obtain my personal credit and criminal report for my own use. I also hold Vista Lake Howell Townhomes HOA Association, Inc. and their agents harmless from damages or any monetary or political ramifications of said report. I understand that this information will be held in the strictest confidence.

Initials: \_\_\_\_\_

**I (We) received a copy of the Vista at Lake Howell Townhomes covenants and by-laws.**

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

**I (We) agree to comply with all Vista Lake Howell Townhomes covenants and by-laws.**

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

**THIS SECTION IS FOR HOA USE ONLY**

The \$40.00 application fee was received on: \_\_\_\_\_

By \_\_\_\_\_

Comments \_\_\_\_\_

\_\_\_\_\_

For the Board of Directors: \_\_\_\_\_

Approve \_\_\_\_\_

Disapprove \_\_\_\_\_

Date \_\_\_\_\_