



PALM BEACH PLANTATION
HOMEOWNERS ASSOCIATION

**New Owner
Application**

8751 Palm Beach Plantation Blvd
Royal Palm Beach, FL 33411

This community is professionally managed by





PALM BEACH PLANTATION
HOMEOWNERS ASSOCIATION

Palm Beach Plantation HOA - Purchase

**c/o Campbell Property Management
8751 Palm Beach Plantation Blvd. Royal Palm Beach, FL 33411**

Application fee: \$200.00 made payable to Palm Beach Plantation, HOA

NOTE: Application must be submitted a MINIMUM of 30 days prior to intended occupancy.

APPLICANT INITIAL: _____ CO-APPLICANT INITIAL: _____

THE APPLICATION

Failure to provide complete and accurate information will result in the delay of the application. Falsifying any information on this document is strictly prohibited.

APPLICANT LEGAL NAME:

CO- APPLICANT LEGAL NAME:

PLEASE ENTER THE COMPLETE LEGAL ADDRESS OF THE RESIDENCE YOU ARE APPLYING FOR:

ADDRESS: _____ BLDG _____ UNIT#: _____

CITY: _____ STATE: _____ ZIP CODE: _____

ARE THERE ANY ADDITIONAL RESIDENT/APPLICANTS? YES NO

****NOTE: ANY ADDITIONAL OCCUPANTS 18 YEARS OF AGE OR OLDER
MUST SUBMIT A SEPARATE APPLICATION****

IF YES, PLEASE LIST FULL FIRST & LAST NAMES, AGE & RELATIONSHIP:

FIRST & LAST NAME	AGE	RELATIONSHIP
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APPLICATION FOR OCCUPANCY

COMMUNITY NAME: _____

LEGAL MOVING-IN ADDRESS: _____

MOVE-IN DATE: _____ DATE OF APPLICATION: _____

CLOSING DATE: _____

RESIDENT INFORMATION

PRIMARY APPLICANT

FULL NAME: _____ DATE OF BIRTH: _____

EMAIL 1: _____ EMAIL 2: _____

CELL PHONE: _____ WORK PHONE: _____

OTHER PHONE: _____

CURRENT RESIDENCE STREET ADDRESS:

APT: _____ CITY: _____ STATE: _____

ZIP CODE: _____ COUNTRY: _____

OWN: RENT: LENGTH OF RESIDENCE: YEARS _____ MONTHS _____

APPLICANT INITIAL: _____

RESIDENT INFORMATION

CO-APPLICANT

FULL NAME: _____ DATE OF BIRTH: _____

EMAIL 1: _____ EMAIL 2: _____

CELL PHONE: _____ WORK PHONE: _____

OTHER PHONE: _____

CURRENT RESIDENCE STREET ADDRESS:

APT: _____ CITY: _____ STATE: _____

ZIP CODE: _____ COUNTRY: _____

OWN: RENT: LENGTH OF RESIDENCE: YEARS _____ MONTHS _____

CO-APPLICANT INITIAL: _____

EMPLOYMENT HISTORY

PRIMARY APPLICANT

EMPLOYMENT TYPE: _____

COMPANY NAME: _____ POSITION: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____ COUNTRY: _____

DATE STARTED: _____ SALARY AMOUNT: _____ PAY PERIOD: _____

SUPERVISOR NAME: _____ SUPERVISOR POSITION: _____

SUPERVISOR PHONE: _____ SUPERVISOR EMAIL: _____

IF SELF-EMPLOYED:

TYPE OF BUSINESS: _____ YEARS IN BUSINESS: _____

BUSINESS PHONE _____

APPLICANT INITIAL: _____

CO-APPLICANT

EMPLOYMENT TYPE: _____

COMPANY NAME: _____ POSITION: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____ COUNTRY: _____

DATE STARTED: _____ SALARY AMOUNT: _____ PAY PERIOD: _____

SUPERVISOR NAME: _____ SUPERVISOR POSITION: _____

SUPERVISOR PHONE: _____ SUPERVISOR EMAIL: _____

IF SELF-EMPLOYED:

TYPE OF BUSINESS: _____ YEARS IN BUSINESS: _____

BUSINESS PHONE _____

CO-APPLICANT INITIAL: _____

REFERENCE CONTACT INFORMATION

PRIMARY APPLICANT

REFERENCE 1:

REFERENCE NAME: _____ RELATIONSHIP TO APPLICANT: _____

CELL: _____ HOME: _____ EMAIL: _____

COUNTRY OF RESIDENCE: _____

REFERENCE 2:

REFERENCE NAME: _____ RELATIONSHIP TO APPLICANT: _____

CELL: _____ HOME: _____ EMAIL: _____

COUNTRY OF RESIDENCE: _____

APPLICANT INITIAL: _____

CO-APPLICANT

REFERENCE 1:

REFERENCE NAME: _____ RELATIONSHIP TO APPLICANT: _____

CELL: _____ HOME: _____ EMAIL: _____

COUNTRY OF RESIDENCE: _____

REFERENCE 2:

REFERENCE NAME: _____ RELATIONSHIP TO APPLICANT: _____

CELL: _____ HOME: _____ EMAIL: _____

COUNTRY OF RESIDENCE: _____

CO-APPLICANT INITIAL: _____

EMERGENCY CONTACT

REFERENCE NAME: _____ RELATIONSHIP TO APPLICANT: _____

ADDRESS: _____ CITY: _____ STATE: _____

CELL: _____ HOME: _____ EMAIL: _____

PET INFORMATION

"NOTE: The Association you are applying for has pet restrictions. Please review in community documents, these documents can be found on the website at PBPHOA.COM.

I AM MOVING IN WITH A PET

AM **NOT** MOVING IN WITH A PET

PET 1 INFORMATION

PET OWNER NAME: _____

PET NAME: _____ PET TYPE: _____

PET SEX: _____ PET BREED: _____

PET AGE: _____ WEIGHT: _____ PET LICENSE: _____

PET DESCRIPTION: _____

PET 2 INFORMATION

PET OWNER NAME: _____

PET NAME: _____ PET TYPE: _____

PET SEX: _____ PET BREED: _____

PET AGE: _____ WEIGHT: _____ PET LICENSE: _____

PET DESCRIPTION: _____

APPLICANT INITIAL: _____ CO-APPLICANT INITIAL: _____

VEHICLE INFORMATION

VEHICLE 1 INFORMATION

YEAR: _____ MAKE: _____ MODEL: _____

COLOR: _____ TAG/LICENSE PLATE: _____

STATE REGISTERED: _____

VEHICLE INSURANCE COMPANY: _____

VEHICLE 2 INFORMATION

YEAR: _____ MAKE: _____ MODEL: _____

COLOR: _____ TAG/LICENSE PLATE: _____

STATE REGISTERED: _____

VEHICLE INSURANCE COMPANY: _____

ACKNOWLEDGEMENT OF COMPLETION

I HEREBY CERTIFY THAT ALL INFORMATION INCLUDED IN THIS APPLICATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND THAT THIS APPLICATION HAS BEEN FULLY COMPLETED TO THE BEST OF MY ABILITY.

Applicant Signature

Co-Applicant Signature

Applicant Print

Co-Applicant Print

Date

Date

**Palm Beach Plantation Homeowners Association, Inc.
8751 Palm Beach Plantation Blvd.
Royal Palm Beach, Fl. 33411**

APPLICATION FOR OCCUPANCY

PLEASE ATTACH THE FOLLOWING DOCUMENTS IF APPLICABLE:

APPLICANT AND CO-APPLICANT PHOTO IDENTIFICATION (US DRIVER'S LICENSE OR PASSPORT)

PET PHOTO (IF APPLICABLE)

PET VACCINATIONS RECORDS (IF APPLICABLE)

VEHICLE REGISTRATION FOR EACH VEHICLE (IF APPLICABLE)

COPY OF PURCHASE CONTRACT SIGNED BY THE APPLICANT(S) AND THE OWNER(S)

ACKNOWLEDGEMENT:

1. I hereby agree for myself and on behalf of all persons who may use the unit which I seek to Lease/Purchase:
 - a. I will abide by all restrictions contained in the By-Laws, Rules & Regulations and Restrictions which are or may in the future be imposed by **Palm Beach Plantation Homeowners Association, Inc.**
 - b. I understand that no more than two (2) persons may reside in bedroom, including dependent children.
 - c. I understand that I must be present when any guest, relatives, visitors or children who are not permanent residents occupy the unit or use the recreational facilities.
 - d. I understand that sub-leasing or occupancy of this unit in my absence is prohibited.
2. I have read a copy of the Documents, and Rules and Regulations: **(Circle one) Yes / No.**

Applicant Signature Date

Co-Applicant Signature (if applies) Date

If you have any further questions, please feel free to contact the office at 561-204-6566 or manager@pbphoa.com

Disclosure Summary

Please contact the property manager for the current amounts b e l o w .

1. As a purchaser of property in this community, you will be obligated to be a member o f a Homeowners' Association.
2. There have been or will be recorded restrictive covenants governing the use and occupancy of properties in this community.
3. You will be obligated to pay assessments to the Association. Assessments may be subject to periodic change. If applicable, the current amount is \$325.00 per month. You will also be obliged to pay any special assessments imposed by the Association. Such special assessments may be subject to change. If applicable, the current amount is \$__
4. You will be obliged to pay a Capital Contribution fee in the amount of (3) months assessments at the time of closing. The current Capital Contribution is \$975.00.00. This is a one-time fee applicable to all home sales & re-sales.
5. You may be obligated to pay special assessments to the respective municipality, county, or special district. All assessments are subject to periodic change
6. Your failure to pay special assessments or assessments levied by a mandatory Homeowners' Association could result in a lien on your property and foreclosure.
7. The statements contained in the disclosure form are only summary in nature, and, as a prospective purchaser, you should refer to the covenants and the Association governing documents before purchasing property.
8. These documents are either matters of public record and can be obtained from the record office in the county where the property is located, or are not recorded and can be obtained from Palm Beach Plantation Homeowners Association, Inc. by accessing the Palm Beach Plantation

Applicant Signature:

Date:

Co-Applicant Signature:

Date:

Resident Registration Form – Safe Passage

☐ New ☐ Update ☐ Delete

Community Name: _____

Owner / Tenant Name: _____ ☐ Owner ☐ Tenant

Owner / Tenant Name: _____ ☐ Owner ☐ Tenant

Rental Term: _____ Start Date: _____ End Date: _____

Primary Phone: _____ Alternate Phone: _____

Community Street Address: _____

Email Address: _____

Email Consent

You must provide consent even if your e-mail address is currently on file.

☐ By initialing this box, I **authorize** Campbell Property Management to communicate Association matters with me via electronic transmission.

☐ By initialing this box, I **do not authorize** Campbell Property Management to communicate Association matters with me via electronic transmission.

Vehicle Information: **Please include copy of registration**

Make	Model	State	Plate Number

Residing in the home:

Name	Age	Relationship

Permanent Visitor/Vendor List:

Name	Make	Model	State	Plate Number

FAQ on the Electronic Disclosure Authorization form

1. What is an “electronic disclosure authorization” form?

This authorization form, when completed and submitted by you, will permit the Palm Beach Plantation Homeowners Association Board of Directors, association Property Management and HOA committees, to communicate with you via email.

2. Why am I being asked to complete this authorization form?

It has been a goal of your Board of Directors to improve communication in all aspects for the Palm Beach Plantation Homeowners Association Community. Florida legislation dictates that certain step be taken to protect the personal information of the members. One of those steps is a requirement to receive written authorization from those members who wish to receive electronic notices from the HOA. Under Florida Statute 720.303(4) & 718.111 12(a), the use of a homeowner’s email address to deliver official notice of an Association meeting or other official notice may ONLY be used if the homeowner CONSENTS to receiving notice via electronic transmission. Since electronic communication is faster, inexpensive, more efficient, and environmentally friendly, the Board of Directors has decided to ask those members wishing to receive electronic notices for their written permission.

3. What type of information will be communicated to me electronically?

It is not the goal of this Board of Directors to use email communication to replace any of the official notices that are required to be given by our governing documents and/or by applicable Florida Statutes. While future email communications may discuss or relay similar information, **official required HOA notices will continue to be sent via USPS mailing** until further notice of a policy change. **It is the desire of the Board of Directors to mainly use electronic emails to send information considered to be general in nature.**

Examples of information sent via email would be:

- Notice of upcoming HOA meetings
- HOA Board meeting minutes
- HOA Newsletter / Schedule of Events
- HOA notices of maintenance issues affecting entire community.
- HOA notice of outside issues that have an impact on our community (e.g., nearby road closures, local construction impact, relevant governmental issues)
- Request for input on various subjects
- Any other HOA business that the Board determines appropriate.

Note: no email communication sent will be used to replace any official notices required by our governing documents and/or by applicable FL Statutes. For example, while a notice of an upcoming Board of Directors or members meeting may be sent via email to those who grant permission, the required meeting notifications will still be posted conspicuously on the property and notification of members meeting will still be sent per our governing documents or by applicable FL Statutes, via USPS mailing to all members.

4. What happens if I don’t complete the electronic disclosure authorization form?

You simply will not receive email communications from the HOA. You will continue to receive any communications, including official notices required to be sent by our governing documents and/or by applicable FL Statutes, via USPS mailing. Notification of quarterly dues will continue to be sent via USPS.

5. Will my email be shared with anyone else other than our property management or Board of Directors?

No. Your signed authorization grants permission for Palm Beach Plantation Homeowners Association to use your email address to convey association-related information via our property management or Board of Directors.

6. How do I sign up?

Complete the attached form. If you have any questions regarding the form, please contact Palm Beach Plantation Homeowners Association Office at (561) 204-6566.

Electronic Disclosure Authorization Form

Please complete and return this form to authorize Palm Beach Plantation Homeowners Association to use your email address for general association-related communications. This authorization restricts the use of your email address for only purposes of communications from the Palm Beach Plantation Homeowners Association Board of Directors, through either direct communication from the Board or through the association's current property management company. Your email address will not be shared with any third parties.

Please sign this form and return it to the management office. You can mail it to the management office or email it to: manager@pbphoa.com

I hereby authorize Palm Beach Plantation Homeowners Association (HOA) to use my email address, as described above, for association-related communications. I understand that no email communication will be used to replace any official notices required by our governing documents and/or by applicable Florida Statutes. Official required HOA notices will continue to be sent to the members via USPS mailing. Palm Beach Plantation Homeowners Association shall maintain, in accordance with applicable Florida statutes, the electronic mailing addresses of those members who consent to receive notice by electronic transmission. I understand that my authorization will remain in effect until my consent to receive notice by electronic transmission is revoked. I further understand that my consent to receive notice by electronic transmission can be revoked by me at any time by notifying Palm Beach Plantation Homeowners Association directly. I agree to promptly notify the Association of any changes in my email address, so as to have a current email address on file with the Association.

Name: _____

PBP HOA property address: _____

Mailing address, if different from above: _____

Email Address to be used for PBP HOA communications: _____

Signature: _____ Date: _____

Palm Beach Plantation Homeowners Association, Inc.

8751 Palm Beach Plantation Blvd Royal
Palm Beach, FL 33411

Main phone: (561) 204-6566 E-

mail: manager@pbphoa.com