



Avalon Beach Club Check List

- Lease / Resale Information Form
- Vehicle Registration Form
- Deed Page
- Pet Page (renters are prohibited from having pets)
- Email Consent Form
- General Authorization for Applicant Screening
- Photo ID (must be legible)
- Disclosure Summary (Sales Only)
- Buyer & Seller Disclosure form
- Voting Certificate (Sales Only)
- Lease / Resale Contract
- \$100.00 payable to Watson Association Management (Non-refundable Processing Fee)
- \$25.00 per person over eighteen (18) payable to Avalon Beach Club (Background Check)

**Please make sure when submitting your application
all documents and fees are included.**

If an application is received and is **NOT** complete, it will **NOT** be accepted and/or processed. Please ensure that you have all the required information, forms and signatures to avoid any delay in the approval of your application.

***Please submit and/or send all complete applications and fees to Watson
Association Management, LLC office located at:
1648 SE Port St. Lucie Blvd., Port St. Lucie, FL 34952**

1648 SE Port St Lucie Blvd., Port St. Lucie, FL 34952
1410 Palm Coast Parkway NW, Palm Coast, FL 32137

Phone 772.871.0004 Fax 772.871.0005
Phone 386.246.9270 Fax 386.246.9271

www.WatsonAssociationManagement.com



Avalon Beach Club

Lease/Resale Application

The following fee made payable to:

Avalon Beach Club

\$25.00 Per Person Over 18 Background Check Fee

Please Note:

- ◆ Applications must be received no less than *30 days* in advance of the beginning of the lease or closing date. Approval or disapproval will be determined within 30 days of application date. Interviews are Required.
- ◆ You may *NOT* move in until you have Approval from the Board of Directors.
- ◆ A personal interview with the Board is required.



Association Management

LEASE / RESALE INFORMATION FORM

PLEASE ALLOW A MINIMUM OF (30) DAYS FOR PROCESSING

Property Address: _____ Date: _____

INFORMATION CONCERNING PURCHASER / TENANT:

Name: _____ Active Military Service Member ____ Yes ____ No

Name: _____ Active Military Service Member ____ Yes ____ No

Present Address: _____

Phone: _____ Phone: _____

Any other Occupants? No ____ Yes ____

Name: _____ Relation: _____ Age: _____

Name: _____ Relation: _____ Age: _____

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Employer: \_\_\_\_\_ Phone: \_\_\_\_\_ Title: \_\_\_\_\_

No. of years: \_\_\_\_\_ Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_ Title: \_\_\_\_\_

No. of years: \_\_\_\_\_ Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

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I (we) intend to:

- Live in the unit as a primary residence
- Maintain the unit as a secondary residence
- Offer the unit as a rental. PLEASE NOTE: Renters are not permitted to sub-lease the premises.

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NEAREST RELATIVE IN CASE OF EMERGENCY: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

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I (we) fully authorize investigation of all answers and references given.

- ◆ *I (we) hereby agree to abide by all documents and Rules & Regulations of AVALON BEACH CLUB CONDOMINIUM ASSOCIATION, INC. a copy of which was received from the Lessor / Seller.*
- ◆ *If seller fails to provide a set of Documents to Buyer, a copy may be obtained from Watson Association Management, LLC at a cost of \$50.00.*
- ◆ *Owner and/or Lessee agree that the terms of the **attached lease / contract** are within the requirements of AVALON BEACH CLUB CONDOMINIUM ASSOCIATION, INC. Rules & Regulations.*
- ◆ *I agree that I will not rent or sell to any person who has not been approved by the Association.*

Purchaser/Tenant: _____ **Date:** _____

Purchaser/Tenant: _____ **Date:** _____

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PLEASE ADVISE US OF ANY ANIMALS TO BE RESIDING IN THE UNIT

- **No pets shall be kept, bred, or maintained for any commercial purpose.**
- **Dogs which are household pets shall always whenever they are outside a unit be confined on a leash held by a responsible person.**
- **An owner shall immediately pick up and remove any solid animal waste deposited by his pet on the properties, including the common areas and the exclusive neighborhood common area.**
- **Two pets per unit less than twenty-five pounds (25) at maturity shall be permitted and allowed.**

Pet(s)? Yes _____ No _____

Pet #1 Type: _____ Weight: _____ Age: _____ Color: _____ Sex: _____
Name: _____

Pet #1 Type: _____ Weight: _____ Age: _____ Color: _____ Sex: _____
Name: _____

Purchaser: _____ Date: _____

Purchaser: _____ Date: _____

- **As tenant(s) in the Avalon Beach Club Condominium I understand that I am not permitted to have a pet during my residency nor any guests or invitees shall bring a pet onto the premises.**

Tenant: _____ Date: _____

Tenant: _____ Date: _____

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Association Management

VEHICLE REGISTRATION FORM

Date: _____

Property Address: _____

Name: _____

Name: _____

Present Address: _____

DESCRIPTION OF VEHICLE(S):

VEHICLE # 1:

VEHICLE # 2:

Make: _____

Make: _____

Model: _____

Model: _____

Year: _____

Year: _____

Color: _____

Color: _____

VIN: _____

VIN: _____

Tag: _____

Tag: _____

State: _____

State: _____

Vehicle 1 registered to: _____

Vehicle 2 registered to: _____

PLEASE NOTE:

- ◆ ALL INFORMATION ON THIS FORM MUST BE COMPLETED.
- ◆ ANY CHANGES IN USE OR APPEARANCE OF THE ABOVE DESCRIBED VEHICLE (S) MUST BE SUBMITTED TO THE BOARD OF DIRECTORS WITH A NEW APPLICATION.
- ◆ IT IS CLEARLY UNDERSTOOD THAT CARS MUST BE PARKED IN THE DRIVEWAYS. PARKING IN THE STREETS IS NOT PERMITTED.

Signature: _____ Date: _____

Signature: _____ Date: _____

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Disclosure Summary
Avalon Beach Club Condominium Association, Inc.

1. As a purchaser of property in this community, you will be obligated to be a member of a condominium 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, which assessments are subject to periodic change.
4. Your failure to pay these assessments could result in a lien on your property.
5. The restrictive covenants cannot be amended without the approval of the association membership.
6. The statements contained in this disclosure form are only summary in nature, and, as a prospective purchaser, you should refer to the covenants and the association governing documents.
7. These documents are matters of public record and can be obtained from the record office in the county where the property is located.

Signature: _____ Date: _____

Signature: _____ Date: _____

**BUYER AND SELLER DISCLOSURE
FOR AVALON BEACH CLUB CONDOMINIUM ASSOCIATION**

The Sellers and Buyers of unit _____ at Avalon Beach Club Condominium Association, 355 S. Ocean Drive, Fort Pierce, Florida hereby agree and acknowledge that the Seller of said unit is responsible for delivering to the buyer the following:

1. Two (2) owner and Two (2) visitor hang tags for vehicles, for a total of four (4)
2. Two (2) entry key fobs
3. Two (2) front door keys (for all three doors in the lobby)
4. Two (2) keys to all communal bathroom - cabana and pool area

It is also acknowledged and agreed between the Buyer and Seller that if the Seller does not furnish the above stated items, the buyer will be responsible for the cost to replace these items, currently \$25.00 for the hang tags and \$35.00 per fob (a total of \$60.00 for two). The Avalon Beach Club Condominium Association will not furnish these items to any Buyer free of charge.

Acknowledged and Agreed to by:

BUYER

SELLER

BUYER

SELLER



DEED RESTRICTED COMMUNITY

I (we) understand that we are moving into a Deed Restricted Community. I (we) hereby agree to abide by all Documents and Rules and Regulations of AVALON BEACH CLUB CONDOMINIUM ASSOCIATION, INC.

I (we) have received a copy of the official Documents from the Lessor/Seller. If Lessor/Seller fails to provide a set of Documents to Buyer/Tenant, I (we) may obtain a copy from Watson Association Management at a cost of \$50.00.

Buyer/Tenant signature _____
Date _____

Buyer/Tenant signature _____
Date _____



EMAIL AUTHORIZATION FORM

New Florida Statutes state it is against the law to send mass emails to owners without their written consent. By completing, signing, and returning this form, you are authorizing the Board of Directors of the AVALON BEACH CLUB and Watson Association Management to send you information of the Association meetings, reports on actions taken by the Board at those meetings, violations, updates and/or special information. Your email address will **not** be used for any other purpose than those listed in the previous sentence.

Yes

I authorize AVALON BEACH CLUB and Watson Association Management to email me appropriate meeting notices, agendas, reports, violation letters and other information.

Email Address: _____

Phone Number(s): _____

Unit Address: _____

Signature(s): _____

Printed Name(s): _____

No

I do not want to receive emails from AVALON BEACH CLUB and Watson Association Management.



A SEPARATE AUTHORIZATION FORM IS REQUIRED FOR EACH APPLICANT
FEE: \$25.00 per adult applicant, made payable to Avalon Beach Club

GENERAL AUTHORIZATION FOR APPLICANT SCREENING

Applicant Name: _____ **DOB:** _____

Social Security Number: _____ **Phone:** _____

Present Address: _____

City: _____ **State:** _____ **Zip:** _____

Applicant hereby Authorizes Avalon Beach Club and its Agent, Watson Association Management, LLC, to obtain and verify a social security number search, criminal report history and credit report required to process his/her application for residency.

Applicant agrees to indemnify and hold harmless Avalon Beach Club and Watson Association Management, LLC., their employees, managers, officers and directors, affiliates, subcontractors, and agents from any loss, expense or damage which may result directly or indirectly from information or reports furnished by Watson Association Management, LLC.

Applicant Signature: _____ **Date:** _____



(SALES ONLY)

VOTING CERTIFICATE
Avalon Beach Club Condominium Association, Inc.

Know all men by these present, that the undersigned is the record owner (s) In AVALON BEACH CLUB CONDOMINIUM Association, Inc. shown below, and hereby constitutes, appoints and designates:

(Insert one owners name above)

As the voting representative for the CONDOMINIUM ASSOCIATION unit owned by said undersigned pursuant to the by-laws of the Association.

The voting representative is hereby authorized and empowered to act in the capacity herein set forth until the undersigned otherwise modifies or evokes the authority set forth in this voting certificate.

Dated this _____ day of _____, 20____.

Signature

Signature

(Unit owner's signature – If jointly-owned, both owners' signatures required)

Property Address _____
Fort Pierce, Florida 34949

When there is a corporation or partnership as owners of the property, then a voting representative must be appointed by the corporation or partnership and becomes the representative. All owners must sign this form to acknowledge this appointment.

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