



## **Carriage Pointe HOA, Inc. Checklist**

Please use this checklist to help ensure your application is complete and ready to be submitted.

- **For Sales:**

- Resale Application Page
- Vehicle Information Page
- Deed Restricted Community Page
- Pet Page
- Email Authorization
- Disclosure Summary
- Voting Certificate
- Copy of executed Sales Contract
- Gate Access Form
- Non-refundable Processing Fee of \$125.00 payable to Watson Association Management, LLC
- Application fee \$100.00 payable to Carriage Pointe HOA, Inc.

- **For Leases:**

- Lease Application Page
- Vehicle Information Page
- Deed Restricted Community Page
- Pet Page
- Addendum to Lease Page
- Copy of executed Lease Contract
- Non-refundable Processing Fee of \$125.00 payable to Watson Association Management, LLC
- Application fee \$100.00 payable to Carriage Pointe HOA, Inc.

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

\*\*\*\*\* If an application is submitted that 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(s) 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**

**Thank you for your Cooperation!**

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



# Association Management

## LEASE/RESALE APPLICATION

Date: \_\_\_\_\_ Property Address: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Active Military Service Member \_\_\_ Yes \_\_\_ No

Co-Applicant Name: \_\_\_\_\_ Active Military Service Member \_\_\_ Yes \_\_\_ No

Present Address: \_\_\_\_\_

Applicant Phone: \_\_\_\_\_ Co-Applicant Phone: \_\_\_\_\_

Any other Occupants? \_\_\_ Yes \_\_\_ No If Yes, list name, age & relationship:

Name \_\_\_\_\_ Relation \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Relation \_\_\_\_\_ Age \_\_\_\_\_

### Do you intend to:

- Live in the unit as a primary residence
- Maintain the unit as a secondary residence
- Offer the unit as a rental
- Rent unit from owner

Applicants employers name: \_\_\_\_\_ No. of years there \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Co-Applicants employers name: \_\_\_\_\_ No. of years there \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

I/WE FULLY AUTHORIZE INVESTIGATION OF ALL ANSWERS AND REFERENCES GIVEN.

I/WE HEREBY AGREE TO ABIDE BY ALL DOCUMENTS AND RULES & REGULATIONS OF CARRIAGE POINTE HOA, INC., A COPY OF WHICH DOCUMENT I HAVE RECEIVED FROM THE SELLER.

(IF SELLER FAILS TO PROVIDE A SET OF DOCUMENTS TO BUYER, A COPY WILL BE MADE AVAILABLE BY THE ASSOCIATION MANAGEMENT COMPANY AT A COST OF \$50.00 PER DOCUMENT COPY.)

LESSEE/PURCHASER: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature

LESSEE/PURCHASER: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name

LESSEE/PURCHASER: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature

LESSEE/PURCHASER: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name

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# Association Management

## VEHICLE INFORMATION

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### **DESCRIPTION OF VEHICLE:**

#### VEHICLE #1:

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

Color: \_\_\_\_\_ Gross Weight: \_\_\_\_\_ VIN: \_\_\_\_\_

Vehicle Tag: \_\_\_\_\_ State: \_\_\_\_\_

#### VEHICLE #2:

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

Color: \_\_\_\_\_ Gross Weight: \_\_\_\_\_ VIN: \_\_\_\_\_

Vehicle Tag: \_\_\_\_\_ State: \_\_\_\_\_

Vehicle 1 registered to: \_\_\_\_\_

Vehicle 2 registered to: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Signature**

**Date**

**Signature**

**Date**

\*\*\*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

**SIGNATURE**

**SIGNATURE**

### FOR ASSOCIATION USE ONLY

The above application is approved \_\_\_\_\_ not approved \_\_\_\_\_

Reason for non-approval: \_\_\_\_\_

Signer: \_\_\_\_\_ Position: \_\_\_\_\_ Date: \_\_\_\_\_

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**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 CARRIAGE POINTE HOA, INC., a copy of which I/We have  
received from the owner.

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Lessee/Buyer  
Signature \_\_\_\_\_ Date: \_\_\_\_\_

Lessee/Buyer  
Signature \_\_\_\_\_ Date: \_\_\_\_\_



**PLEASE ADVISE US OF ANY ANIMALS TO BE RESIDING IN THE HOME**

- 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.

Pet? Yes \_\_\_\_\_ No \_\_\_\_\_

Pet Type: \_\_\_\_\_ Weight: \_\_\_\_\_ Age: \_\_\_\_\_ Color: \_\_\_\_\_ Sex: \_\_\_\_\_  
Name: \_\_\_\_\_

Pet? Yes \_\_\_\_\_ No \_\_\_\_\_

Pet Type: \_\_\_\_\_ Weight: \_\_\_\_\_ Age: \_\_\_\_\_ Color: \_\_\_\_\_ Sex: \_\_\_\_\_  
Name: \_\_\_\_\_

Pet? Yes \_\_\_\_\_ No \_\_\_\_\_

Pet Type: \_\_\_\_\_ Weight: \_\_\_\_\_ Age: \_\_\_\_\_ Color: \_\_\_\_\_ Sex: \_\_\_\_\_  
Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**EMAIL CONSENT 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 Carriage Pointe HOA, Inc., 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.

We want to keep you better informed about the developments and issues regarding your investment as an owner of Carriage Pointe HOA, Inc.

\*\*\*\*\*

**Yes**

I authorize Carriage Pointe HOA, Inc. and Watson Association Management to email me appropriate meeting notices, agendas, reports, violation letters and other information.

**Email Address:** \_\_\_\_\_

**Property Address:** \_\_\_\_\_

**Phone Number(s):** \_\_\_\_\_

**Signature(s):** \_\_\_\_\_

**Printed Name(s):** \_\_\_\_\_

**No**

I do not want to receive emails from Carriage Pointe HOA, Inc. and Watson Association Management.

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## Association Management

### Disclosure Summary For Carriage Pointe HOA, Inc.

1. As a purchaser of property in this community, you will be obligated to be a member of a Homeowners association.
2. There have been recorded restrictive covenants governing the use and occupancy of properties in this community.
3. You will be obligated to pay maintenance assessments to the association in the amount of **\$510.00 quarterly**. Assessments may be subject to periodic change.
4. You will be obligated to pay any special assessments that may be imposed by the association.
5. You may be obligated to pay a special assessment to the respective municipality, county, or special district. All assessments are subject to periodic change.
6. Your failure to pay any of these assessments could result in a lien on your property.
7. 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 before purchasing property.
8. These documents are matters of public record and can be obtained from the record office in the county where the property is located or from Watson Association Management, LLC for a fee.

Purchaser: \_\_\_\_\_ Date: \_\_\_\_\_

Purchaser: \_\_\_\_\_ Date: \_\_\_\_\_

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**(SALES ONLY)**

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***VOTING CERTIFICATE***  
***Carriage Pointe HOA, Inc.***

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Know all men by these present, that the undersigned is the record owner (s) IN CARRIAGE  
POINTE HOA, INC. shown below, and hereby constitutes, appoints and designates:

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**(Insert one owners name above)**

As the voting representative for the HOMEOWNERS 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\_\_\_\_.

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**Signature**

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**Signature**

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

Property Address \_\_\_\_\_  
Fort Pierce, FL 34981

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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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*Carriage Pointe Estates HOA*

Managed by - **Watson Association Management**  
1648 SE Port St Lucie Blvd., Port St. Lucie, FL 34952  
Ph. (772) 871-0004 Fax (772)871-0005  
www.Watsonassociationmanagement.com email: paminfo@Watsonrealtycorp.com

**SECURITY GATE & INFORMATION FORM**

Welcome to the neighborhood. You may pick up barcodes at the address above. The first (3) are free & each additional is \$10.00

Checks or Money Orders made payable to **Carriage Pointe Estates HOA.**

*No CASH or Plastic accepted.*

**Vehicle #1**

Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Color: \_\_\_\_\_  
Tag# \_\_\_\_\_  
State: \_\_\_\_\_

**Vehicle #3**

Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Color: \_\_\_\_\_  
Tag# \_\_\_\_\_  
State: \_\_\_\_\_

**Vehicle #2**

Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Color: \_\_\_\_\_  
Tag# \_\_\_\_\_  
State: \_\_\_\_\_

**Vehicle #4**

Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Color: \_\_\_\_\_  
Tag# \_\_\_\_\_  
State: \_\_\_\_\_

**GATE ACCESS INFORMATION**

***Please print clearly***

**OWNERS NAME:** \_\_\_\_\_

**PROPERTY ADDRESS:** \_\_\_\_\_

**PHONE #:** \_\_\_\_\_

**FOUR DIGIT GATE CODE:** \_\_\_\_\_

**(PREFERRED PERSONAL GATE CODE)**

- **PLEASE NOTE: ALL INFORMATION ON THIS FORM MUST BE COMPLETED**

- **ALL VEHICLES MUST BE REGISTERED TO THE OWNERS OF THE HOME, AND/OR REGISTERED TENANTS OF THE HOME AND/OR SON'S/DAUGHTER'S OF ABOVE.**

- **ANY TENANT NOT PROPERLY REGISTERED WITH THE ASSOCIATION WITH, AN UP-TO-DATE LEASE WILL NOT BE ISSUES BARCODES UNTIL SUCH PAPERWORK IS SUBMITTED AND PROCESSED BY STAFF.**

- **IT IS CLEARLY UNDERSTOOD THAT CARS MUST BE PARKED IN THE DRIVEWAY AND/OR GARAGES.**

**PARKING IN THE STREETS ARE NOT PERMITTED.**

**TODAY'S DATE:** \_\_\_\_\_

**AMOUNT PAID:** \_\_\_\_\_

**CHECK/MO #** \_\_\_\_\_

**OWNERS SIGNATURE:** \_\_\_\_\_



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## Addendum to Lease

“The tenant hereby agrees, in accordance with Florida Law, that upon receipt of notice from **Carriage Pointe HOA, Inc.** (the Association) that the Landlord is delinquent in paying any monetary obligation due to the Association, the tenant will pay his/her subsequent rental payments and continue to make such payments until all the monetary obligations of the Landlord (parcel owner) have been paid in full to the association and the Association release the tenant or until the tenant discontinues tenancy in the parcel.” Payment due the Association may be in the same form as you paid your Landlord and must be sent by United States mail or hand delivery to the Association, c/o Watson Association Management 430 NW Lake Whitney Place, Port St. Lucie, FL 34986 and payable to **Carriage Pointe HOA, Inc.**

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Lessee Signature \_\_\_\_\_ Date: \_\_\_\_\_

Lessee Signature \_\_\_\_\_ Date: \_\_\_\_\_

Owner Signature \_\_\_\_\_ Date: \_\_\_\_\_

Owner Signature \_\_\_\_\_ Date: \_\_\_\_\_

Property Address: \_\_\_\_\_