

ROTHMOOR ESTATES CONDOMINIUM ASSOCIATION, INC.

405 Cara court, Largo, FL 33771

55+ Community

APPLICATION DATE _____

UNIT # _____

APPLICATION FOR PROPOSED Sale PROPOSED CLOSING DATE: _____

Lease From _____ to _____ (3 Month Minimum)

APPLICANT #1 _____

PHONE _____ CELL _____

APPLICANT #2 _____

PHONE _____ CELL _____

Email _____

CHECKLIST

THE FOLLOWING ITEMS ARE NEEDED TEN (10) DAYS PRIOR TO A FORMAL INTERVIEW/APPROVAL FOR THE PURCHASE OF A CONDOMINIUM. MISSING OR INCOMPLETE INFORMATION WILL CAUSE THE APPLICATION TO BE RETURNED WITHOUT ACTION.

- _____ Application fee \$150 (pay to ROTHMOOR ESTATES)
- _____ Completed application
- _____ Color copy of driver license (each applicant)
- _____ A copy of sales contract or lease
- _____ Background form with signatures of applicant(s)
- _____ Affidavit for transfer of ownership (Sale)

- _____ Certificate for tenant approval (Lease)
- _____ Completed 55+ age verification page
- _____ Completed Voting Certificate (Sale)
- _____ Signed rules acknowledgement page
- _____ Completed One Call Sheet
- _____ Completed Emergency Contact Information

COMPLETED APPLICATION MAY BE MAILED/FAXED OR EMAILED

MAIL ORIGINALS WITH CHECK TO:

Ameri-Tech Companies, Inc.

24701 US Hwy 19 North

Clearwater, FL 33763

Phone: 727 726-8000 Fax: 727 723-1101

Email Application to: CPalmer@ameritechmail.com

ROTHMOOR ESTATES CONDOMINIUM ASSOCIATION, INC.

405 Cara court, Largo, FL 33771

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Applicant #1 _____ Email _____

Phone # _____ Cell # _____

Date of Birth _____ Age _____

Applicant #2 _____ Email _____

Phone # _____ Cell # _____

Date of Birth _____ Age _____

If you are purchasing this unit for your own housing or as personal housing for a family member, indicate the names, ages and vehicles of those who will regularly occupy the unit. (Note: A newly purchased unit may NOT be leased until owned for 1 year)

VEHICLES

Vehicle Make _____ Mode _____ Color _____ Year _____ State _____ Tag # _____

Vehicle Make _____ Mode _____ Color _____ Year _____ State _____ Tag # _____

EMERGENCY CONTACT

Name _____ Phone # _____

Name _____ Phone # _____

APPLICANT ACKNOWLEDGEMENT OF RECEIPT OF THE ASSOCIATION DOCUMENTS (SALE ONLY)

Before you complete and sign this form, the seller is responsible for providing you, at no cost to you, a copy of the following documents. Have you received these documents? (soon to be available online)

- a. The Declaration of Condominium with all amendments? Yes _____ No _____
b. Articles of Incorporation with all amendments? Yes _____ No _____
c. Bylaws with all amendments? Yes _____ No _____

I understand that I am responsible for the contents of the above documents and that I will be held to comply with all of the provisions therein notwithstanding any contrary oral representations. [] Initial

APPLICANT INTERVIEW

Once all paper work as listed on page 1 has been received, an interview is required for sales and leases. Please indicate times and days that you are available for the face to face interview.

Times: _____ Mon Tues Wed Thurs

AFFIDAVIT FOR TRANSFER OF OWNERSHIP (SALE ONLY)

Upon completing the interview successfully, you will be given the notarized "Affidavit for Transfer of Ownership" which you must bring to your closing.

APPLICANT ATTESTATION AND SIGNATURE

I/we hereby authorize the Association to do a background check, including credit history and criminal background check. The results of the background check shall remain confidential.

APPLICANT(S) SIGNATURE(S)

Signature: _____ **Date:** _____
Printed Name: _____

Signature: _____ **Date:** _____
Printed Name: _____

BACKGROUND INFORMATION FORM **DATE:** _____

I / We _____, prospective
tenant(s) / buyer(s) for the property located at _____

ManagedBy: _____ OwnedBy: _____

Hereby allow TENANT CHECK and or the property owner / manager to inquire into my / our credit file, criminal, and rental history as well as any other personal record, to obtain information for use in processing of this application. I / We understand that on my / our credit file it will appear the TENANT CHECK has made an inquiry. I / We cannot claim any invasion of privacy or any other claim that may arise against TENANT CHECK now or in the future.

PLEASE PRINT CLEARLY

<u>INFORMATION</u>	<u>SPOUSE / ROOMMATE</u>
SINGLE _____ MARRIED _____	SINGLE _____ MARRIED _____
SOCIALSECURITY#: _____	SOCIALSECURITY#: _____
FULL NAME: _____	FULL NAME: _____
DATE OF BIRTH: _____	DATE OF BIRTH: _____
DRIVER LICENSE #: _____	DRIVER LICENSE #: _____
CURRENT ADDRESS: _____	CURRENT ADDRESS: _____
_____ HOW LONG? _____	_____ HOW LONG? _____
LANDLORD & PHONE _____	LANDLORD & PHONE: _____
_____	_____
PREVIOUS ADDRESS _____	PREVIOUS ADDRESS _____
_____ HOW LONG? _____	_____ HOW LONG? _____
EMPLOYER: _____	EMPLOYER: _____
OCCUPATION: _____	OCCUPATION: _____
GROSS MONTHLY INCOME: _____	GROSS MONTHLY INCOME: _____
LENGTH OF EMPLOYEMENT: _____	LENGTH OF EMPLOYMENT: _____
WORK PHONE NUMBER: _____	WORK PHONE NUMBER: _____
HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO	HAVE YOU EVER BEEN ARRESTED: (CIRCLE ONE) YES NO
HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO	HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO
SIGNATURE: _____	SIGNATURE: _____
_____	_____
PHONE NUMBER: _____	PHONE NUMBER: _____
_____	_____

CERTIFICATE OF APPROVAL SALE TRANSFER

Rothmoor Estates Condominium Association, Inc.

405 Cara Court, Largo, FL 33771

I, _____ do hereby certify that I am the duly qualified Board of Director of Rothmoor Estates Association, Inc. and that I have the authority to execute this Certificate of Approval, and that the proper officials have approved the transfer

From Seller: _____

To Buyer: _____

Address of Record: _____

Congratulations on your purchase,
Rothmoor Estates Association, Inc.

Date: _____

Board of Director Signature

Board of Director Signature

Title

Title

ROTHMOOR ESTATES CONDOMINIUM ASSOCIATION, INC.

405 Cara Court, Largo, FL 33771

CERTIFICATE FOR TENANT APPROVAL

LEASE DATE FROM _____ TO _____

This Certificate will serve as approval for the LEASE of the unit at:

Address _____

From: Owner _____ Phone # _____

Address _____

To: Tenant _____ Phone # _____

The Tenant Owner Committee has reviewed this proposal and has acted favorably on behalf of the transaction.

On Behalf of Rothmoor Estates Condominium Association, Inc.,

Date: _____

By: _____

Title _____

ROTHMOOR ESTATES CONDOMINIUM ASSOCIATION, INCO
405 Cara Court, Largo, FL 33771

55+ Community

OVER 55 FORM

The Provisions of the Fair Housing Amendments Act require that each over fifty five community must conduct a census of all occupants in each unit. Please answer the following questions.

Name _____ Owner/Tenant

Date of Birth _____

Name _____ Owner/Tenant

Date of Birth _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

1 Bedroom 2 bedroom Townhouse

Date occupants first began/will begin to reside in the dwelling: _____

To establish our position as an over 55+ community, we must have on file a survey indicating the ages of all occupants residing in Rothmoor Estates. Proof can be a copy of any document showing date of birth such as: Birth Certificate, Driver License, State Identification Card, Voter's Registration Card, etc.

Signature — Owner/Tenant _____ Date _____

Document Provided _____

Witness _____ Date _____

Signature — Owner/Tenant _____ Date _____

Document Provided _____

Witness _____ Date _____

VOTING CERTIFICATE

Rothmoor Estates Condominium Association, Inc.

405 Cara Court, Largo, FL 33771

We the undersigned, being all of the owners of unit # _____, do hereby certify that the following named one of us is the authorized voter for the forgoing unit, and shall remain such designated voter until this certificate is revoked by subsequent certificate:

Name of authorized voter _____

Date this for completed _____

Please select the signature category below which describes your form of ownership and sign in the appropriate places:

We are all natural persons who are owners of the above described unit.

Owner

Owner

We are President, Vice-President, and Secretary or Assistant Secretary of the corporation named _____ which owns the described unit.

President/Vice President

Secretary/Assistant Secretary

I am a General Partner of the general or limited partnership named:

_____ which owns the above described unit.

General Partner

I am the trustee of the trust named _____ which owns the above described unit.

Trustee

RULES AND REGULATIONS
FOR
ROTHMOOR ESTATES CONDO ASSOCIATION, Inc.

This is a brief summary of Rothmoor Estates Rules and Regulations. A more complete set can be found in the documents.

These regulations apply to all residents, whether owners or tenants, as well as their guests. The condominium documents provide for methods whereby these rules can be enforced. Infractions will not be tolerated.

1. Residents shall not commit, or permit the commission of any activity which would constitute a nuisance to other residents, to wit:
 - a. No loud playing of radio, television or other equipment
 - b. No commission of any immoral or illegal actions
 - c. No pets are allowed
2. No peddling, soliciting, or commercial enterprises of any kind.
3. No signs of any kind shall be displayed within the boundaries of ROTHMOOR ESTATES, except those used by the association. An owner wishing to dispose of their unit, may place a sign in the window or door indicating the fact the said unit is for sale.
4. Cable television connections have been provided for each unit. No individual exterior antennas or dishes, whether for television or radio, will be installed or permitted, without written permission from the Board of directors.
5. The speed limit within Rothmoor Estates is 10 miles per hour.
6. There is no storage on the premises or overnight parking, of any trailer, camper, motorcycle (except within the garage of the owner), boats or other vehicles or modes of transportation other than automobiles or noncommercial trucks. Resident parking should be in the owner's garage or on the driveway. Other vehicles should be parked in the designated areas at either end of Rothmoor's streets. No overnight parking on the street is allowed.
7. Residents and guests should be properly attired at all times for activity in which they are engaged.
8. Recreation area and pool restrictions:
 - a. The swimming pool will be closed daily at 10:00 PM
 - b. Residents should control the use of the pool by guests and visitors who are present at their invitation.
 - c. Use of suntan oils or lotions is not permitted in the pool area.

Initial _____

- d. Food and glass containers must be kept away from pool decks and must not be taken into the pool.
 - e. Persons with long hair must wear bathing caps or tie their hair back in the pool.
 - f. Children will not be allowed in the pool and recreation areas unless accompanied by a resident host who shall be responsible for the children at all time.
 - g. All residents or guests must wear footwear and cover-ups in recreation areas and common areas at all times.
 - h. Residents and guests shall not bring any alcoholic beverages into the recreational areas at any time unless to a function specifically sponsored by the Board of Directors and at that time within the limitations prescribed by written notice from the board concerning such function.
 - i. Individual owners, who hold private parties in the recreational facility, shall be responsible for the conduct of their guests therein and in the event alcoholic beverages are served, they shall "be responsible for the actions of their guests to the extent that they are influenced by the use of alcoholic beverages." They shall also be responsible for cleaning and leaving the premises in the same condition as before said party.
9. Exterior laundry lines should not be visible from the premises of neighbors and should be located within the confines of the unit of the owner.
 10. Maintenance and upkeep of the common element is the responsibility of the association. Therefore, no individual unit owner should in any way modify or change the exterior of his unit and/or common areas without written permission via a formal board vote.
 11. The community dumpster is located on Mindy Court at the south side of our property. Break down boxes before putting them in the dumpster. NEVER leave trash or items on the ground inside or outside of the dumpster enclosure.
 12. Bulk pick up is NOT provided by the Association. Contractors MUST remove any debris from our premises. "Do It Yourself" (DIY) owners must call a private trash removal service, pay them directly and have items picked up from their own home.
 13. No animals may be kept in the condominium and boarding or taking care of someone else's animal on a temporary or any other basis is not allowed.
 14. The recreation hall is available to all Rothmoor residents for communal and limited private use. There are no limitations (other than the normal obligation of good conduct) on Rothmoor owners who reserve and utilize the recreation hall for functions involving Rothmoor residents and their guests.

Any Rothmoor owner may also reserve and utilize the recreation hall for a private function which involves non-Rothmoor people but, only under the following conditions and limitations.

Initial _____

WATERING RESTRICTIONS

The City of Largo purchases its potable water from Pinellas County. Watering restrictions for potable and well or pond water are set by the county. The City of Largo’s watering schedule is listed here.

TIMES AND DAYS FOR ROTHMOOR ESTATES

May **NOT** water between 8:00 am and 6:00 pm.

Addresses ending in:	Authorized Watering Days:
Even numbers: 0, 2, 4, 6, 8	Tuesdays
Odd numbers: 1, 3, 5, 7, 9	Thursdays
Mixed or No Address (such as common areas and other “no address” locations)	Thursdays
Low-volume watering (soaker hoses, and watering)	Any day and time

Violations

For first offences, you will be issued a “warning” and a notice of potential citation for additional offences.

For any additional offences, customers will receive a Notice of Violation and a \$193 citation. If you receive a citation, you may contest it, however, in doing so, you may incur additional court costs.

Basic Rules

Wasteful and Unnecessary Use of Waer Is Prohibited. This includes:

- Leaving a hose on unattended.
- Hosing down a driveway, solid surface or structure when another method could be used.
- Not fixing an irrigation or plumbing issue, loke broken sprinkler heads or outdoor faucets, after receiving a verbal or written notice.

For information of new plants, please visit: <https://pinellas.gov/watering-schedule-and-rules>;

Initial _____

ROTHM00R ESTATES

Please Return to Ameri-Tech Community Management, Inc. 24701
US Hwy 19 N, suite 102, Clearwater, FL 33763
E-mail: CPalmer@ameritechmail.com — 727-726-8000 Ext 357

EMERGENCY CONTACT INFORMATION FOR OWNER OR TENANT

PROPERTY ADDRESS _____ UNIT _____

Please complete the form below by PRINTING the requested information, sign & date and either hand deliver, mail, or scan & email to Ameri-Tech Community Management c/o Gloria Reed.

Homeowners Name(s) _____

Resident Address _____ Unit _____

Mailing Address (if different) _____

Home Telephone Number _____

Work Telephone Number _____ Text Cell Phone: YES or NO

Email _____ Cell # _____

Nearest Contact (relative, friend, neighbor) with a key (in case of emergency)

Name _____ Phone _____

Mailing Address _____

Nearest Relative (in case of emergency)

Name _____ Phone _____

Mailing Address _____

TENANT(s), if applicable _____

Home Telephone Number _____

Work Telephone Number _____ Text Cell Phone: YES or NO

Email _____ Cell # _____

Number of Person(s) occupying unit

Number of Pets (and type)

Adults(s) _____ Children _____

Dogs Cats Other

Vehicle(s) Make/Yr Model

Color TAG Number

PLEASE SIGN AND DATE BELOW:

Owner Signature

Date

Co-Owner Signature (if applicable)

Date

I give permission to share my personal information (phone numbers, e-mail & address) with other Rothmoor Estate owners.

Initial _____

BUYER'S ACKNOWLEDGEMENT OF ROTHMOOR ESTATES

OCCUPANCY AND LEASING RESTRICTIONS

I/we _____ are purchasing the unit at _____ and acknowledge that the Rothmoor Estates Declaration of Condominium restricts occupancy and leasing of Units in part as follows:

No unit may be occupied by any person other than a "bona fide Owner" during the first twelve (12) months of ownership following transfer of a Unit. A "bona-fide Owner" is defined as an individual that owns at least one-third (1/3) of the total interest in the Unit as shown in the Public Records of Pinellas County. If an Owner violates this restriction, any period of time during which the Unit is leased in violation of this restriction will be added to the one-year time period which starts when title to the Unit is acquired.

A Unit shall not be leased for a period of less than three (3) months. Each Unit shall be occupied only by a single family and guests, as a residence and for no other purpose.

The members of the Association are currently considering extensive revisions to the Declaration and other governing documents, which are subject to change. You should review the latest drafts of the revised documents, including all new use restrictions, which are available <https://rothmoorestates.org/documents.php>. In particular, the revisions to the Declaration define the term "lease" as follows:

The term "lease" shall be defined as any arrangement, written or unwritten, whether identified as a lease, rental, license or otherwise, under which a person(s), whether identified as a lessee, tenant, guest, or otherwise, other than the Owner of a Unit, uses or occupies the Unit and Owner receives any consideration, compensation or benefit either directly to the Owner or indirectly for the Owner or for the Unit, including payment of assessments to the Association, real estate taxes, utilities or other charges to the Unit.

The term "lease" shall also specifically include any vacation rental or other short-term use or occupancy of a Unit arranged by any means, including but not limited to Airbnb, VRBO, or any other similar service or arrangement, all of which shall be prohibited if occupancy is for a period of less than three (3) months. The term "lease" shall also specifically include any use or occupancy of a Unity by exchange or swap arranged by any means, including but not limited to HomeExchange, Home for Exchange, or any other similar service or arrangement, with or without consideration, compensation or benefit to or for the Owner of the Unit, all of which shall be prohibited if occupancy is for a period of less than three (3) months.

Date: _____

Buyer's Signature

Buyer's Signature

Buyer's Printed Name

Buyer's Printed Name

Initial _____

FREQUENTLY ASKED QUESTIONS

PLEASE COMPLETE THIS FORM

Q How will I receive messages?

A. *It depends on the urgency of the situation Under your preferences. Options for receiving Messages include:*

METHOD	WHAT YOU NEED TO DO TO RECEIVE MESSAGES
VOICE CALL (cell or landline or both depending on which phone numbers you have on file with us)	Make sure we have your current home, work and/or cell phone number on file. <i>A form is provided on the right.</i>
EMAIL (If we have your current email address on file)	Provide us with your email address; <i>A form is provided on the right.</i>
SMS TEXT MESSAGE	Provide us with the correct cell phone number and give us permission to text you by <i>completing the form on the right.</i>

Q Why do we need a messaging service?

A. *By using this service, we are able to better communicate with residents while reducing the need to print and distribute notices. It will also allow us to send you urgent messages such as weather/evacuations, neighborhood watch advisories, or amber alerts. We understand that good communication is vital to good community relationships!*

Q Will my contact information be kept private?

A. *None of your personal information will be shared with anyone outside of One Call Now. One Call Now takes the security and privacy of your personal information (i.e. phone numbers, email addresses) very seriously. This is never sold or shared – you will not receive any unsolicited calls as a result of using the service.*

Q Do I have to pay any additional fees for this service?

No, this service is free to our residents!

UNIT NUMBER OR ADDRESS

RESIDENT 1

RESIDENT 2

NAME

NAME

PRIMARY PHONE: (best emergency contact)

PRIMARY PHONE: (best emergency contact)

PHONE #2

PHONE #2

PHONE #3

PHONE #3

PHONE #4

PHONE #4

PHONE #5

PHONE #5

PHONE #6

PHONE #6

EMAIL ADDRESS #1

EMAIL ADDRESS #1

EMAIL ADDRESS #2

EMAIL ADDRESS #2

EMAIL ADDRESS #3

EMAIL ADDRESS #3

EMAIL ADDRESS #4

EMAIL ADDRESS #4

EMAIL ADDRESS #5

EMAIL ADDRESS #5

SIGNATURE

SIGNATURE

Initial _____