High Pines Subdivision Homeowners Association, Inc.
P.O. Box 204
Winter Beach, FL 32971-0204

Homeowner Information & Ownership Transfer

Please complete/update the Homeowner Information Form. It is important that we have your complete form on file. The information will help us provide information on Board Meetings, Issues, and events, etc. Return this form by mail to the address above or via email to: **David Reisinger at sebastiancpa@live.com** for Owner updates or **Matt Gordon at mhgordon@bellsouth.net** for estoppel requests.

Completion of this form related to an ownership transfer must include a copy of the proposed Sales Contract and an Estoppel processing fee is $250.00 made payable to High Pines Subdivision, HOA. The from must be received by the Association at the above address or via email NOT LESS THAN 2 WEEKS (Saturdays, Sundays, Holidays and the date of Receipt Excepted) PRIOR to the date action is desired of the Association. Missing or incomplete information will cause the application to be returned without action.

Update _____ or Ownership Transfer _____ (check one)

Estoppel Requested? Yes _____ N/A _____ (check one)

Estoppel Return Address: _____
_____
_____
_____

Date completed/requested: _____, 20_____

Name & Address Information:

Owner #1: _____

Owner #2: _____

Primary Mailing Address: _____
_____
_____

Contact Number(s): Mobile: _____ Home: _____ Other: _____

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Email Address(s):

Owner #1: _____

Owner #2: _____

Emergency Contact Information:

Name: _____

Relationship: _____

Address: _____
_____
_____

Phone: _____

Document Delivery Preference:

Please indicate how you would prefer to receive your meeting notices, packets, or other information:

- ☐ Email (Please also complete electronic communication authorization form)
- ☐ Regular Mail

Occupancy:

How will the residence be occupied (please check one)?

Personal year-round housing ☐ Personal seasonal housing ☐ Rental unit: ☐

If Seasonal, address & dates of seasonal home residency:

Date(s): _____

Address: _____
_____
_____

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If Rental, please provide:

- ☐ Copy of signed lease agreement (Pursuant to Article IV section 4.34 of the Declaration of Covenants)
- ☐ Tenant phone number(s) and email address(s)
- ☐ Management Company contact information (if any)
- ☐ Refundable Rent Deposit in the amount of $500 (Pursuant to Article IV section 4.6 of the Declaration of Covenants). Make checks payable to High Pines Subdivision, HOA

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ITEMS TO BE TURNED OVER AT CLOSING BY SELLER

AT CLOSING, THE SELLER(S) MUST PROVIDE:

_____ A COPY OF THE ASSOCIATION'S "GOVERNING DOCUMENTS" WHICH INCLUDES THE ARTICLES OF INCORPORATIONS, DECLARATION OF COVENANTS, AND BY-LAWS TO THE BUYER(S) AND all AMENDMENTS.

If seller fails to provide a set of Documents, to Buyer, a copy may be obtained by at the following cost. Please initial which set of documents you require.

a. _____ Already have a set of Documents from the Seller.

b. _____ Request Electronic set of Documents (forwarded to my e-mail).

c. _____ Request Hard set of Documents. The cost of which will be reimbursable to the Association for the actual printing cost as supported by the vendors invoice provided by an outside duplication company.

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 High Pines Subdivision Homeowners Association, Inc. received via method noted above.

Buyer Signature_____ Date_____

Buyer Signature_____ Date_____

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Consent to Receive Documents from High Pines Subdivision Homeowners Association, Inc. via Electronic Transmission

In order for the Association to send via email, documents that would otherwise require regular postal mailing, the Association must receive and keep in the records this written consent form. Therefore, the board requests that you sign and date this document and send it via regular mail, certified mail, email attachment, or hand delivery to:

High Pines Subdivision Homeowners Association, Inc.
P.O. Box 204
Winter Beach, FL 32971-0204

Or

David Reisinger or sebastiancpa@live.com

I/we, _____, owner(s) of High Pines Subdivision, HOA lot number _____ consent to receive via electronic transmission all and any documents, notices, or invoices that the Board of the Association may elect to send to me, or is otherwise required to send to me/us as owner via regular postal mail.

The email address(s) to use for those notices is:

Owner #1: _____@_____

Owner #2: _____@_____

I/we understand that I/we may revoke this consent at any time by delivering in the same manner as this consent my/our written and signed instruction to revoke consent. I/we also understand that should the board of association experience two consecutive unsuccessful attempts to send any notice, that such experience constitutes an automatic revocation of my/our consent.

_____ _____
Signature Date

_____ _____
Signature Date

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CERTIFICATE OF APPOINTMENT OF VOTING REPRESENTATIVE

THIS IS TO CERTIFY that the undersigned, constituting all owners of record of (address):

_____ in High Pines Subdivision, HOA have designated:

_____
(Print name of voting representative)

as their representative to cast all votes and to express all approvals that such owners may be entitled to cast or express at all meetings of the membership of the Association and for all other purposes provided by the Declaration, Articles and Bylaws of the Association.

The following examples illustrate the proper use of this Certificate:

- Unit owned by Bill and Mary Rose, husband and wife. Voting Certificate ***required*** designating either Bill or Mary as the voting representative. NOT A THIRD PERSON.

- Unit owned by John Doe and his brother, Jim Doe. Voting Certificate ***required*** designating either John or Jim as the Voting Representative. NOT A THIRD PERSON.

- Unit owned by Overseas, Inc., a corporation. Voting Certificate ***required*** designating person entitled to vote, signed by the President or Vice President of Corporation and attested by Secretary or Assistant Secretary of Corporation.

- Unit owned by John Jones. No Voting Certificate required.

This Certificate is made pursuant to the Declaration and the Bylaws and shall revoke all prior Certificates and be valid until revoked by a subsequent Certificate.

Dated this _____ day of _____, 20__

_____ _____
Printed Name of Owner Signature of Owner

_____ _____
Printed Name of Owner Signature of Owner

PLEASE RETURN THIS FORM TO OUR OFFICE.

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OWNER ATTESTATION

I HEARBY CERTIFY THAT ALL THE ABOVE INFORMATION IS CORRECT AND I HAVE RECEIVED, READ, AND UNDERSTAND A COPY OF THE FOLLOWING DOCUMENTS. I ALSO ATTEST TO ABIDE BY THE CONTENT OF THESE DOCUMENTS WHOLLY KNOWN AS THE HIGH PINES SUBDIVISION HOMEOWNERS ASSOCIATION OFFICIAL DOCUMENTS:

_____ Declaration of Covenants, Conditions & Restrictions for High Pines Subdivision and Amendments

_____ Bylaws for High Pines Subdivision and Amendments

_____ High Pines Rules and Regulations

_____ Articles of Incorporation and Amendments

Owner #1: Signature: _____ Date: _____

Printed name: _____

Owner #2: Signature: _____ Date: _____

Printed name: _____

RESERVED FOR ASSOCIATION USE:

Attestation Received by: Signature: _____ Date: _____

Printed Name:_____

- ☐ Email
- ☐ Regular Mail
- ☐ Hand Delivery