

Villanova at Hunter's Creek Condominium Association
Condo Owner Information Form

Date: _____ - _____ - _____

Unit Address: _____

Owner Contact Info:

Name of Owner(s) for Unit: _____

1) Home Phone: _____ Work Phone: _____

Cell Phone: _____ Fax No.: _____

E-mail Address: _____

2) Home Phone: _____ Work Phone: _____

Cell Phone: _____ Fax No.: _____

E-mail Address: _____

Person to contact in case of an emergency: (This information will be kept confidential and will only be used in case of personal emergency)

Name: _____ Relationship: _____

Day Phone: _____ Night: _____

This Unit is used for...

Circle One:

Owner Occupied

Tenant Occupied

Vacation/Second Home

Vacant for Resale

If the Unit is not Owner Occupied, please provide your current mailing address:

Street Address _____

Apt/Ste/Box No. _____

City _____

State _____

Zip Code _____

If Unit is used as a Vacation/Second Home:

How often is the unit expected to be occupied by you per year? _____ DAYS _____ WKS _____ MTHS

Please complete all OWNER info below.

If unit is Owner-Occupied please complete the following information. Total Number of residents of the unit (including children): _____

Identify names of residents and Birthdates of all residents, including children.

Name: _____

Printed Name

DOB

Name: _____

Printed Name

DOB

Name: _____

Printed Name

DOB

Name: _____

Printed Name

DOB

INSURANCE COMPANY INFORMATION

Insurance Carrier _____ Policy # _____

Mail Address _____ City _____ State _____ Zip _____

FL 718 requires all owners to carry insurance on the inside of the unit with a \$2000 loss assessment rider and the Association named as "additional insured". This is known as an HO6 policy, sometimes called a "condo wrap" policy. Proof of insurance is to be sent to the Association on an annual basis.

MORTGAGE INFORMATION

Mortgage Company _____ Loan# _____

Address to which payments are sent:

Mailing Address _____ City _____ State _____ Zip _____

PET INFORMATION – The Community Documents impose restrictions on the number and type of pets Rules & Regs #36 – The total of all pets belonging to a Unit Owner shall not exceed two (2),and the total weight of all petsshall not exceed 50lbs. "Pets" are limited to dogs, cats and tropical fish.

Pet(s) must be kept on a leash at all times while it is outside of the Premises. **PETS ARE NOT ALLOWED TO RUN LOOSE AT ANY TIME.** Resident/Owner agrees to fully indemnify the Landlord, Owner or Manager for any damages arising out of injury to another person or to another pet by the pet(s). Pet(s) must not be tied or kept outside door, in the hallway or on the balcony or on open porch or lanais. Resident/Owner may be assigned a designated area to walk pet(s)

and Resident/Owner must walk pet(s) in that area only. Resident/Owner is responsible for immediately cleaning up after pet(s) and must do so. Failure to abide by the rules pertaining to pets could result in a violation and possible litigation cost.

DESCRIPTION OF PET(S) – Resident must supply picture and documentation of each pet and complete the following,

_____	_____	_____
Breed/Name	Color	Weight
Vaccination/ License Tag # _____	Year _____	

_____	_____	_____
Breed/Name	Color	Weight
Vaccination/ License Tag # _____	Year _____	

INDEMNIFICATION: By virtue of keeping my pet(s) within the Property, I agree to indemnify and hold the Association and each member of the Board of Directors free and harmless from any loss, claim or liability of any kind or character arising by reason of my keeping the above pet within the Property. I recognize & accept responsibility and liability for all damages that may result from the presence of our pet in the condominium, whether that is to a person, the common elements, a unit or another pet.

VEHICLE REGISTRATION

	Vehicle #1	Vehicle#2	Vehicle#3
Make			
Model			
Year			
Color			
Plate #			
State			
VHC Permit #			

HAVE YOU RECEIVED A COPY OF THE RULES AND REGULATIONS?

YES ___ NO ___ Your Signature _____

If Unit is leased:

You have **7 days** from execution of lease to submit a copy of the lease to the Management office. Leases may only be provided **BY THE OWNER OR PROPERTY MANAGER** to reduce fraudulent attempts to occupy a unit. (In adherence to Section 19: Selling, Leasing and Mortgaging of Units: Article 19.2 Leases of the Condominium Documents. it is required that all rental agreements be submitted to the Management office within (7) days in advance of tenant arrival.) The community documents allow **THE BOARD TO DENY THE OWNER'S RIGHT TO LEASE IF THE ASSESSMENT ACCOUNT IS DELINQUENT**. Your tenants **MUST REGISTER IN THE OFFICE WITHIN 7 days** for parking stickers, gate and amenity access.

Please check off that you have submitted the following information to the Villanova Management office. You have **10 days** from receipt of this questionnaire to submit any missing information to the Management office. (In adherence to Section 19: Selling, Leasing and Mortgaging of Units; Article 19.2 Leases of the Condominium Documents, it is required that all rental agreements be submitted to the Management office within (7) days in advance of tenant arrival.)

___ Current Lease Agreement on File _____ Resident Registration Form

___ Agent Information (If Applicable)

How many gate cards do you have for your unit? _____

How many gate cards have been turned over to your tenant? _____

List the 5-digit number found on the back lower left hand side of all gate card(s) belonging to your unit below:

Has your tenant registered their gate cards with the Management office? _____

Directory Code _____

Has your tenant received a copy of the Villanova Rules & Regulations? _____

What missing information do you need to complete this questionnaire?

Villanova Standard Lease _____ Resident Registration Form _____

How would you like this information to be sent? US Mail Email Fax

Do you use a management company/agent to handle the leasing of your unit? YES NO

If so, what is the name of the agent/agency and a contact phone number for them?

HAVE YOU PROVIDED A COPY OF THE RULES AND REGULATIONS TO YOUR TENANTS?

YES ___ NO ___

If the Unit is Offered For Sale:

Is the Unit currently on the market? _____

If yes, is it listed with a Realtor/Realty Company, who is the agent? _____

Have you provided a gate card or gate code to the Agent? _____ List the Card # _____

What is the gate code you provided to the Agent? _____

Please list all names below that have been provided a gate code for access to Villanova:

Name

Reason Gate Code Given

AFFIDAVIT

I affirm that the information I have provided above is true and complete as of this date. I further acknowledge that I understand and agree to comply with all association restrictions. By signing this registration form, I agree to adhere to all the parking rules and regulations as set by the Condominium Association. I further agree that any vehicle may be towed from condominium property at my expense and risk if it is parked in violation of the Condominium Association Rules & Regulations.

I (we) am (are) the owner/s of the unit identified above. I (we) certify that the information above is accurate and that I (we) have received, read, understand and will abide by the Rules & Regulations of the Villanova at Hunter's Creek Condominium Association.

Printed Name of Owner #1

Printed Name of Owner #2

Signature of Owner #1

Signature of Owner #2

FOR OFFICE USE ONLY

Accepted for the Villanova at Hunter's Creek Condominium:

For the Association

Date

_____ Data entered into Caliber

Initials

Date

_____ Rules & Regs

Initials

Date

_____ Parking Permits/Stickers

Initials

Date

_____ Gate Directory Updated

Initials

Date

_____ Amenity Passes

Initials

Date

_____ Mail Box Key

Initials

Date

_____ Gate Card

Initials

Date