

VERO BEACH HOTEL AND CLUB CONDOMINIUM ASSOCIATION, INC.

NOTICE OF INTENT TO SELL

Board of Directors

The Vero Beach Hotel and Club Condominium Association, Inc., Vero Beach, FL

Dear Sir/Madam:

In compliance with Article 18 of the Declaration of Condominium of The Vero Beach Hotel and Club Condominium Association, Inc., I hereby notify you of my (our) intention to sell

Unit Number _____ to: _____
as purchaser(s), as evidenced by the following attachments:

- ___ 1. Legible, executed and paginated copy of **Sales Agreement**.
- ___ 2. Confidential **Application for Membership**.
- ___ 3. **Three originally signed letters** of reference.
- ___ 4. **Certificate of Approval** (completed by Admissions Committee).
- ___ 5. Copy of Recorded Deed after closing.
- ___ 6. \$100.00 Transfer Fee. (check made payable to Vero Beach Hotel and Club Condominium Association, Inc.).
- ___ 7. Appointment of Voting Representative (if applicable).
- ___ 8. **Signed form acknowledging that Purchaser(s) have received, read, understand and will abide by the Documents and Rules and Regulations of the Condominium.**
- ___ 9. Owner **Emergency Data Sheet**.
- ___ 10. \$50.00 Fee for Credit Report. \$100.00 Fee for Estoppel. (Checks made payable to OPC Management, Inc.)

Your action in regard to this application is requested within 30 days in accordance with the requirements of the Declaration of Condominium referred to above.

Seller's Signature

Seller's Signature

OPC Management Staff

Date Received

Realtor & Phone Number

VERO BEACH HOTEL AND CLUB CONDOMINIUM ASSOCIATION, INC.
APPLICATION FOR MEMBERSHIP

To the Members of Vero Beach Hotel and Club Condominium Association, Inc., Vero Beach, Florida.

Request is hereby made by the undersigned for membership in the Association. The undersigned agrees to accept membership in accordance with the terms and provisions of the Association as contained in the Declaration of Covenants and Restrictions, its attachments and exhibits thereto, as they may be amended from time to time.

(Please Print) DATE: _____
Name of Applicant _____ Soc Sec. # _____
Name of Co-Applicant _____ Soc Sec. # _____
Entity Applicant _____ FED Tax ID# _____
Residence Address _____ Phone # _____
Business Address _____ Phone # _____
Florida Address _____ Phone # _____
Nature of Business _____
Company Name _____ Position _____
Bank Reference (Name) _____
(Address) _____

It is understood by me that simultaneously with making application for membership in the Association, I have likewise made application to purchase property in The Vero Beach Hotel and Club Condominium. If I am accepted for membership in the Association, my membership in the Association shall be completed when and if the property is purchased.

I agree to abide by each and every regulation of the Association, and I understand that in the event my membership is approved and I become the owner of property in The Vero Beach Hotel and Club Condominium, I agree that I will not sell nor rent to any person who has not been approved by the Association.

Applicant Signature

Date

Joint Applicant Signature (if applies)

Date

**THE VERO BEACH HOTEL AND CLUB
CONDOMINIUM ASSOCIATION, INC.**

Dear Admissions Committee:

I have been given a copy of THE VERO BEACH HOTEL AND CLUB CONDOMINIUM ASSOCIATION, INC. Rules and Regulations and a copy of the Association Documents due to my application as a Buyer for Unit Number _____. I have received, read and understand and will abide by the Condo Rules and Regulations and the Vero Beach Hotel and Club Condominium Documents.

Buyer's Signature

Joint Buyer's Signature (if applicable)

Date _____

**THIS FORM IS TO BE EXECUTED AND RETURNED PRIOR TO
SCHEDULED INTERVIEW.**

**PERSONAL INTERVIEW OF POTENTIAL BUYERS WITH A BOARD
MEMBER MAY BE REQUIRED AT THE CONDOMINIUM PRIOR TO
ISSUANCE OF THE CERTIFICATE OF APPROVAL AND CLOSING.**

SALE CERTIFICATE OF APPROVAL

This is to certify that VERO BEACH HOTEL AND CLUB CONDOMINIUM ASSOCIATION, INC. consents to and approves the sale of the following described parcel, to wit:

Condominium Unit No. ____ of **THE VERO BEACH HOTEL AND CLUB CONDOMINIUM ASSOCIATION, INC.** a condominium, according to the Declaration of Condominium thereof, filed at Official Records Book 2124, Page 454 of the Public Records of Indian River County, Florida.

TOGETHER with an undivided interest in the COMMON ELEMENTS as set forth in said Declaration of Condominium and TOGETHER with all other appurtenances thereto, as set forth in said Declaration of Condominium.

By SELLER: _____

To BUYER: _____

This approval is given pursuant to Section 18 of the Declaration of Condominium of Vero Beach Hotel and Club Condominium Association, Inc., a condominium, as recorded in Official Record Book 2124, Page 454 of the Public Records of Indian River County, Florida.

Signed this ____ day of _____, 20__

VERO BEACH HOTEL AND CLUB CONDOMINIUM ASSOCIATION, INC.

By: _____ SEAL

Its: _____

Corporate Seal

Attest: _____ SEAL

Its: _____

STATE OF FLORIDA)

) ss:

COUNTY OF INDIAN RIVER)

Before me personally appeared _____ and _____, to me well known, and known to me to be the individual(s) described in and who executed the foregoing instrument as _____ and _____, respectively, of said Association, and that the seal affixed to the foregoing instrument by due and regular corporate authority and that said instrument is the free act and deed of said Association.

WITNESS my hand and official seal this ____ day of _____, 20__.

Notary Public
My Commission Expires:

(NOTARY SEAL)

VOTING REPRESENTATIVE FORM

To the Secretary of **VERO BEACH HOTEL AND CLUB CONDOMINIUM ASSOCIATION, INC.** (the "Association").

THIS IS TO CERTIFY that the undersigned, constituting all of the record owners of Unit No. _____ have designated

(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, the Articles and Bylaws of the Association.

The following examples illustrate the proper use of this Certificate:

- (i) 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).
- (ii) Unit owned by Overseas, Inc., a corporation. Voting Certificate must be filed designating an officer or employee entitled to vote, signed by President or Vice-President of Corporation and attested by Secretary or Assistant Secretary of Corporation.
- (iii) Unit owned by John Jones. No Voting Certificate required.
- (iv) Unit owned by Bill and Mary Rose, husband and wife. Voting Certificate not 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 the _____ day of _____, 20__

OWNER

OWNER

NOTE: This form is not a proxy and should not be used as such. Please be sure to designate one of the joint owners of the unit as the Voting Representative, not a third person.

BACKGROUND INVESTIGATION REQUEST FORM

PHONE NO: 561-626-3100 X104
CO: OPC MANAGEMENT
CONTACT BILLIE INTAGLIATA
FAX NUM. 561-625-1245 ATTN: BILLIE

TO: FEDERAL BACKGROUND SERVICES
PHONE 561-969-9966
FAX 561-969-9988
BILL TO: OPC MANAGEMENT

LAST NAME: _____ FIRST NAME: _____ MIDDLE/ MAIDEN: _____

RACE: _____ *SEX: _____ *BIRTH DATE: _____ *SOCIAL SEC #: _____

U.S. BORN CITIZEN: (YES) _____ ** (NO) _____ IF NO, MUST PROVIDE ALIEN OR PERMANENT RESIDENT No.

ALIEN No. _____ DOCUMENT TYPE: _____ EXPIRATION DATE: _____

DRIVER'S LIC. #: _____ STATE: _____

ADDRESS: _____

(>) CITY, COUNTY, STATE, ZIP: _____

(>) You MUST enter County, City, or Zip Code for NON-FLORIDA (OUT-OF-STATE) CRIMINAL HISTORY Searches:

(PLEASE CHECK SEARCHES REQUESTED)

- FLORIDA CRIMINAL HISTORY FDOC
- FLORIDA CRIMINAL HISTORY FDLE
- CRIMINAL RECORDS (50 STATES)
Includes sexual predator/offender
- STATEWIDE CRIMINAL HISTORY _____
- FL DRIVERS LIC HIST (3 YEAR)
- FL DRIVERS LIC HIST (7 YEAR)
- OUT OF STATE DRIVER LIC. HIST _____
- NATIONWIDE SEXUAL OFFENDER
- EMPLOYMENT VERIFICATION (/EMPLOYER)
- SOCIAL SECURITY # VERIFICATION
- *** CREDIT HISTORY INDIV. JOINT
- FLORIDA WORKERS' COMP HISTORY
- FLORIDA SEXUAL OFFENDER / PREDATOR
- INTERPOL (WORLDWIDE CRIMINAL)
- NATIONWIDE DOSSIER
- EDUCATION VERIFICATION () PER SCHOOL
- VEHICLE TAG SEARCH
- OTHER _____

SIGNATURE OF THE ABOVE APPLICANT IS REQUIRED FOR ALL SEARCHES!!!

I authorize the above named company and its agent, FEDERAL BACKGROUND SERVICES to perform the above-indicated employment searches. I further request that contacted companies, institutions, or state agencies release this information as expeditiously as possible.

* Required for Criminal History, Workers' Compensation and Social Security Verification Searches

** Alien number, document type and expiration date is required if NOT a U.S. BORN citizen

*** Credit Histories require Full Name, SSN and most recent address

Signature of Applicant (REQUIRED) _____ Date _____