



APPLICATION FOR MEMBERSHIP

(PURCHASE, LEASE, GIFT, DEVISE, INHERITENCE)

Age restriction related to Fair Housing Act
Vehicle restriction related to parking and vehicle types
Lease restriction on subletting

**Review Colony Woods governing documents prior to completing Application for Membership
\$50 filing fee**

(Please Print or Type)

Date: _____ Colony Woods Address: _____

Name of Proposed Owner/Lessee: _____

Present Address: _____ Tel. No.: _____

City: _____ State: _____ Zip: _____

Realty Name: _____ Tel. No.: _____

Realty Address: _____

City: _____ State: _____ Zip: _____

Name of Salesperson: _____ Tel. No.: _____

Proposed Owner/Lessee: (If lease, a copy of lease agreement must be attached.)

Names, Relationship and occupation of all proposed occupants of the dwelling:

<u>NAME</u>	<u>RELATIONSHIP</u>	<u>OCCUPATION</u>	<u>AGE</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Verification of age by committee: _____

Pets: (Give description) _____

Remarks:

1. I/We hereby acknowledge receiving copies of the following documents pertaining to COLONY WOODS HOMEOWNERS' ASSOCIATION, INC.:

- Articles of Incorporation, dated January 26, 1978 Yes _____ No _____
- Declaration of Restrictions and Amendments Yes _____ No _____
- By-Laws and all amendments thereto Yes _____ No _____
- Rules and Regulations Yes _____ No _____
- Architectural Standards Yes _____ No _____

2. I/We hereby agree for myself/ourselves and on behalf of all persons who may use this dwelling which I/we seek to purchase/lease:

- a. I/We shall abide by all of the restrictions contained in the above listed documents including any and all future revisions and/or additions to these documents that the COLONY WOODS HOMEOWNERS' ASSOCIATION, INC. may adopt.
- b. As purchaser(s), I/we understand that I/we am/are obligated to pay Maintenance and/or Special Assessment fees to the COLONY WOODS HOMEOWNERS' ASSOCIATION, INC.
- c. I/We shall be responsible when guests, relatives or children who are not permanent residents occupy the home or use the recreational facilities and common grounds.
- d. I/We understand that sub-leasing without the written approval of the Board of Directors is prohibited.
- e. I/We understand that one occupant of the home must be at least 55 years of age.

3. I/We understand that no lease may be approved by the Board of Directors for a period of less than twelve (12) months or more than once per 12-month period.

4. I/We understand that any violation of the items, provisions, conditions, and covenants of COLONY WOODS HOMEOWNERS' ASSOCIATION, INC. documents provides cause for immediate action as therein provided.

5. I/We understand that the acceptance for purchase or lease is conditioned upon the truth and accuracy of this application and upon the approval of the Board of Directors.

IN WITNESS WHEREOF I/WE have executed the foregoing application this _____ day

Of _____, 20 _____.

Witness

Applicant

Witness

Applicant

I/We are interested in serving on the following committees:

- _____ Architectural Review Committee _____ Pool Committee
- _____ Irrigation Committee _____ Social Committee
- _____ Lawn Committee _____ Sunshine Committee
- _____ Orientation Committee _____ Colony Woods Newsletter
- _____ Beautification Committee _____ Website Committee

Colony Woods Homeowners Association	Martha Kostamo
P.O. Box 273614	Orientation Committee Chairperson
Boca Raton, FL 33427	561-750-8356