



**Lakengren**  
**Property Owners Association**

22 W. LAKENGREN DRIVE  
EATON, OHIO 45320  
PHONE: 937/456-3173 FAX: 937/456-9671

**APPLICATION FOR MEMBERSHIP  
FOR PROPERTY OWNERS**

Lot Number(s): \_\_\_\_\_ Date Purchased: \_\_\_\_\_

Property Address: \_\_\_\_\_ Phone#: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Co-Owner/Spouse Name: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Mailing Address (If Different Than Property Address): \_\_\_\_\_

If you purchased a vacant lot, do you plan to build a home?  YES  NO

If you purchased a home, what type of home is it?  Permanent Residence or  Vacation/Part-time

**EMERGENCY INFORMATION: List Name & Address of Nearest Relative Not Living At Same Residence**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

**MEMBERSHIP AGREEMENT:**

By accepting membership in the Lakengren Property Owners Association to keep current as duly determined and authorized by the Lakengren Property Owners Association Inc.

To abide by all Rules, Regulations, Covenants, Conditions and Restrictions, both current and future, of Lakengren Property Owners Association Inc. Membership Dues/Assessments are non-transferable. Membership Dues are non-transferable.

To keep property mowed and to maintain property in an orderly manner – free of trash debris, unlicensed vehicles, etc.

**It is his/her duty to notify Lakengren Office of intention to re-sell property. Also notify Lakengren Property Owners Association of Realtor listing property.**

**A copy of closing statement or property deed will be provided along with this application.**

**As new members, applicant(s) has/have in his/her possession a copy of the Lakengren Property Owners Association, Rules and Regulations and Deed Restrictions outlining the rights and obligations of membership in the L.P.O.A. Further, applicant(s) is/are familiar with all of the characteristics associated with ownership of property at the Lakengren Property Owners Association, Inc.**

**Effective 11/18/11, all NEW Property Owners, Tenant Members, Associate Members and any resident family members, 18 years of age and older are subject to Sex Offender Background checks per Article II, Section 2, Sub-paragraph B, of the LPOA Code of Regulations.**

**Property Owners Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

**Co-Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

**Fees Paid Amount: \_\_\_\_\_ Date: \_\_\_\_\_**

**Board Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

**Revised 10-30-97**

**Revised 12-2-04**

**Revised 1-8-10**

**Revised 2-4-12**