## Naples Reserve Homeowners Association, Inc. 14885 Naples Reserve Circle Naples, FL 34114 Phone: (239) 231-4188

NaplesReserveAdmin@fsresidential.com

#### PURCHASE APPLICATION

\*\*\*THE HOA REQUIRES 30 CALENDAR DAYS TO REVIEW AND PROCESS THE PURCHASE APPLICATION FROM THE RECEIPT OF A COMPLETED PACKET, WHICH INCLUDES PAYMENT \*\*\*

The packet must be hand delivered or mailed; it may NOT be emailed. The application may be submitted by the seller, seller's agent, buyer, or buyer's agent, but the person hand delivering it must have prior approval to enter the community.

The seller is required to sign the Realtor Release form designating a point of contact (POC) prior to the submission of the application.

Closing Date (if known):

### Please type or print legibly the following information:

Date:

Unit Address:			
Applicant Information:			
Buyer Name (1):			
Email:		Phone:	
Buyer Name (2):			
Email:		Phone:	
Current Home Address:			
City:	State:	Zip Code:	
Business/Profession (Applicant 1):			
If retired, former profession:			
Business/Profession (Applicant 2):			
If retired, former profession:			

The Documents of Naples Reserve Homeowners Association, Inc. provide an obligation of unit owners that all units are to be used as Single-Family Residences ONLY.

Please state the name, relationship, and age of all other people who will be occupying the unit on a regular basis but who will NOT be deeded homeowners and can provide proof of residency documentation as listed on the Naples Reserve HOA Long-Term Permanent Resident Form (Pages 20 – 21). Please provide a completed Background Check Form, Driver's License/ID, and Application Fee for each person listed below 18 years of age or older.

Name	Relationship	Age/DOB

Have any of the applicants or any of those listed in the chart above ever been convicted of a felony or crime involving violence to persons or property?

If so, please provide full details on a separate sheet of paper and return it with the application.

## Person to be notified in case of an emergency:

Name:	Relationship:	Phone:
Address:		
Will this be your primary or se	easonal residence?	<u>.</u>
Do you intend to lease the unit	?	
If being purchased by a Trust occupants:	or LLC, please list the Trust or I	LLC Name and designate the prima
Trust or LLC Name:		
Primary Occupant Names:		
1		
2		

## Cars to be kept at Naples Reserve:

Rental	Cars	Onl	v
Itelitai	Cuib		L.y

Make / Model	Year	Color	License Plate	State

Will you have pets on the property?			
□ Yes			
$\square$ No			

If you have pets on the property, please fill out the Pet Registration form and include a photo of each pet.

Purchase Application Check List:
Please ensure all boxes on this list are checked before submitting the application to the HOA.

	Completed Application (Pages 1 – 5).
	Completed Application (1 ages 1 – 3).
	Completed New Resident Information Form (Pages 8 – 9).
	Completed Maintenance Fees and Payment Options Form (Page 10).
	Completed Design Review Committee Acknowledgement Form (Page 11).
	Completed Electronic Voting & Notice Consent Form (Page 12).
	Completed Voting Certificate Form (Page 13).
	I have read and understand the Amenity Access Smart Phone Credentials and RFID Eligibility and Process Form (Pages $14-15$ ).
	Completed Golf Cart and Pet Registration Forms (if necessary) (Pages 16 – 19).
	I have read the Governing Documents for the community (all occupants 18 years and older).  Documents may be found at NaplesReserveHOA.com/Information/Governing Documents Policies & Rules.
	I have provided a copy of a valid Driver's License for all applicants and occupants (those who can provide proof of permanent residency) 18 years and older.
	I have provided a legible copy of the complete sales agreement signed by both parties 30 days prior to closing.
	I have completed and signed the consent for Brown's Background Check for all applicants and occupants 18 years and older (Page 7).
	I have completed and signed the Long-Term Permanent Resident Form (proof of residency documents can be provided at check-in) for all occupants 18 and over who will not be deeded homeowners (Pages $20-21$ ).
	I have provided a \$200 application fee per single person or couple (married / significant other) including all applicants and occupants.  Please make the check payable to: Naples Reserve HOA.  Personal checks or credit cards in person only. Credit card payments CANNOT be accepted over the phone (credit incurs a processing fee).  CASHIERS CHECKS AND/OR MONEY ORDERS ARE NOT ACCEPTED.
ı otal am	ount of check(s) provided for application fee = \$

# ALL FEES AND RFID CAR STICKERS ARE NON-REFUNDABLE AND NOT RETURNABLE.

New homeowners will receive 2 RFID stickers free of charge.

Additional RFID stickers are \$25.00 per sticker. RFID Stickers will not be sold for rental cars.

Please be advised that initial access to the community will only be granted as a registered guest of the management office. Please contact our office prior to arrival to schedule a date and time to check in with the HOA Office and to be added to the guest list,

(239) 231-4188 or NaplesReserveadmin@fsresidential.com.

New owner(s) must come to the office between 9:00 AM and 5:00 PM Monday through Friday to check in with their warranty deed and closing statement to receive all credentials.

Entry to the community after initial entry is by RFID sticker or via the guest lane.

Please relay any questions on these policies and procedures and any questions regarding the status of this application to the HOA Office at NaplesReserveAdmin@fsresidential.com.

I/We have read, and agree to abide by, the Declaration and all properly promulgated Rules & Regulations of Naples Reserve Homeowners Association, Inc.

Applicant Signature:	Date:		
Applicant Signature:	Date:		

Naples Reserve Homeowners Association, Inc. 14891 Naples Reserve Circle Naples, FL 34114 Phone: 239-231-4188

Email: NaplesReserveAdmin@fsresidential.com

# Naples Reserve Realtor Release

	Address:		
	Homeowner Name(s		
	Homeowner Email:		
	Homeowner Phone:		
Home	eowner has author	the following agent(s) to sell, lease and/or host an open house at thabove property; maximum of two agents.	ıe
	Agent 1 Name:		
	Agent 1 Email:		
	Agent 1 Phone:		
	Agent 2 Name: Agent 2 Email:		
	Agent 2 Phone:		
	•	sible for notifying the HOA of any changes to authorized real estate agents listed on this form.  and procedures outlined above by the Naples Reserve HOA Board of Directors.	
Home	eowner Signature:	Date:	

The HOA Office must receive this signed form directly from the homeowner (either via email or in person).

# BROWN'S BACKGROUND CHECKS CONSENT TO OBTAIN CONSUMER REPORT ON SUBSCRIBER Naples Reserve Homeowners Association Inc.

I understand that you may obtain consumer reports that relate to my credit and/or criminal history. This information will, in whole or in part, be obtained from AISS, a Sterling Infosystems Company, 6111 Oak Tree Blvd, 4<sup>th</sup> floor, Independence, OH 44131, telephone 800.853.3228. I understand that you may be requesting information from various federal, state and other agencies or institutions, which maintain public and non-public records concerning my past activities relating to my credit and/or criminal history. This information will be reviewed by the Association and may be reviewed by a unit owner if it's a rental.

I authorize, without reservation, any party, institution, or agency contacted by AISS to furnish the above mentioned information: Date of Birth\* Social Security Number Applicant Name \*Date of Birth is requested in order to obtain accurate retrieval of records. If International please provide **Passport Number** Co-Applicants Name Date of Birth Social Security Number If International please provide **Passport Number** Alias/Previous Name(s) Current Physical Address City & State Zip code California, Minnesota & Oklahoma Applicants Only: Please check here to have a copy of your consumer report sent directly to you. **Notice to CALIFORNIA Applicants** Under Section 1786.22 of the California Civil Code, you have the right to request from AISS, upon proper identification, the nature and substance of all information in its files on you, including the sources of information, and the recipients of any reports on you, which AISS has previously furnished within the twoyear period preceding your request. You may view the file maintained on you by AISS during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services. Upon making a written request, you may receive a summary of your report via telephone. DATE \_\_\_\_\_ SIGNATURE Co-Applicant DATE SIGNATURE \_\_\_\_\_



# New Resident Information Naples Reserve Homeowners Association

### Please print clearly

Closing Date:	
Property Address:	
Property Owner (1):	
Email Address*:	
Home Phone:	Mobile Phone:
Property Owner (2):	
Email Address*:	
Home Phone:	Mobile Phone:
Preferred Mailing Address: _	
City, State and Zip Code:	
*Emails provided will be adde Sports & Fitness, and event u	ed to our email distribution for weekly HOA community, pdates.
Select One: Seasonal	Full-time Resident
If seasonal, what months a	re you typically in residence?
Occupant Information (in a	ddition to property owner(s):
Name:	Relationship to owner:
Home Phone:	Mobile Phone:
Email Address (if you would	d like them to receive HOA emails):
Name:	Relationship to owner:
Home Phone:	Mobile Phone:
Email Address (if you would	d like them to receive HOA emails):
Emergency Contact Inform	nation:
Name:	Relationship to owner(s):
Home Phone:	Mobile Phone:

#### **Vehicle Information:**

Check	this box	if you only have ren	tal vehicles		
would appro sticke	l like to po priate inf r/s when	urchase additional s ormation. Please br	tickers (\$25 ing a check o v resident pa	or credit card (2.9% acket. Resident mus	the box, and fill out the
Free Sticker:	Make: _		Model:		_Color:
	Year:	Tag#		State:	
Free Sticker:	Make: _		Model:		_Color:
	Year:	Tag#		State:	
Purchase? <b>□</b> :	Make:		Model:		_Color:
	Year:	Tag#		State:	
Purchase? <b>□</b> :	Make:		Model:		_Color:
	Year:	Tag#		State:	

Return this completed form with your Purchase Application.

#### **Important Information for New Homeowners**

After your closing, you should come to the HOA office with your warranty deed and closing statement (an appointment should be made ahead of time with the office) for the new homeowner check-in to receive all the information you'll need to get settled as new homeowners as well as receive amenity and access credentials.

To expedite your HOA account creation, the HOA office requests a copy of your HUD (Closing Disclosure) and Warranty Deed after closing. Your title company will send the requested documents to our corporate office (and they should), but that will delay the account creation by several weeks. Documents provided to the HOA office will expedite the HOA account creation to 10 business days or less, so if you are not able to check in with the HOA Office soon after closing, please email those documents to the following email address.

#### naplesreserveadmin@fsresidential.com

Please contact our office, (239) 231-4188, prior to your closing and arrival at Naples Reserve to schedule an appointment for check-in.

Naples Reserve Homeowners Association New Resident Form – 1/25/2024



## **Maintenance Fees & Payment Options**

#### Effective October 1, 2023

#### **Maintenance Fees:**

As noted in the Naples Reserve Homeowners Association documents, assessments for your property should be remitted on /or before the 1st day of each quarter. (Jan, Apr, Jul & Oct). Late fees and interest charges are assessed on the 15<sup>th</sup> of the month to allow for mailing and processing times. Payments are due on the 1<sup>st</sup> and there is no grace period. Payments can be made online via the NaplesReserveHOA.com website or mailed to the following address including your address and account number on your check:

#### Naples Reserve Homeowners Association, Inc.

c/o FirstService Residential P.O. Box 30348 Tampa, FL 33630-3348

#### **Late Fees and Interest:**

The late fee is 5% of the assessment amount, and the maximum amount of interest as allowed by the Declaration will be computed from the first day of the missed assessment payment. The late fee and interest will be assessed on the 15th of the month and interest will accrue until payment is made.

#### **Online Payments:**

Payments can be made online via the <u>NaplesReserveHOA.com</u> website using the following payment options: E-Check, Visa, Mastercard, American Express or Discover Card. ACH (automatic withdrawal) can also be enabled. Please note that all credit card payments are subject to a convenience fee charged by the merchant and all one-time E-check payments (electronic check) are charged a one-time payment fee; you will see this fee before submitting your payment. There will be no convenience fees charged for ACH (automatic withdrawal).

Date:	
Applicant 1 Printed Name:	
Applicant 1 Signature:	
Applicant 2 Printed Name:	
Applicant 2 Signature:	
Address:	



#### DESIGN REVIEW COMMITTEE ACKNOWLEDGEMENT

I am the undersigned owners or tenants of	f Address	in Naples Reserve
Understand and Acknowledge that ANY I and Approval.	Exterior Modifications to	the home require a DRC Application
Project Information including but not limit	ted to:	
<ul> <li>Project Overview and Scope</li> <li>Design Guidelines and Standards</li> <li>Architectural Plans and Drawings</li> <li>Exterior Materials and Finishes</li> <li>landscaping and Site Plan</li> <li>lighting and Signage</li> <li>Color Palette and Aesthetics</li> <li>Construction Schedule and Phase</li> <li>Change Orders and Modifications</li> <li>Committee Decision Process</li> <li>Project Maintenance and Inspection</li> <li>Committee Contact Information</li> </ul>		
I, the undersigned, acknowledge that I have Design Review Committee's requirements that compliance with these guidelines is necessarily	and guidelines for the p	roject mentioned above. I understand
I hereby agree to adhere to the Design Replanning, construction, and completion phaemodifications to the approved plans require	ases of the project. I und	erstand that any changes or
By signing below, I confirm that I have reac outlined in this Design Review Committee		d to the terms and conditions
Applicant 1 Signature:	Date:	
Applicant 2 Signature:	Date:	

## NAPLES RESERVE HOMEOWNER'S ASSOCIATION

14885 Naples Reserve Circle, Naples, FL 34114

## **Electronic Voting & Notice Consent Form**

CONSENT TO PARTICIPATE IN ELECTRONIC VOTING AND/OR RECEIVE ELECTRONIC NOTICE

I hereby acknowledge pursuant to Chapter 720, Florio the opportunity to vote through an online voting system Owner in Naples Reserve, with an address of,	
I hereby consent as follows:	
**INITIAL NEXT TO EACH VOTING	AND NOTICE TO CONSENT**
(initial) <b>ELECTRONIC VOTING</b> : By signate the following email address for electronic v	
Clearly print em	ail address
( initial) <b>ELECTRONIC NOTICE</b> : I/we c transmission for meetings of the Board of Directors, C Meetings of the Members of Naples Reserve HOA and community information. I designate the following empurposes:	Committees, Annual, and Special I general notifications about pertinent
Clearly print em	ail address
Clearly print em	ail address
I/we acknowledge that mailed/paper notices may not consent in writing within the time period in the Board that any email address provided to the Association for Record accessible by the Association.	l resolution establishing electronic voting and
All Owners or Authorized Voter must print, sign and	date below:
Signature 1:	
Print Name:	Date
Signature 2:	
Print Name:	



### **VOTING CERTIFICATE**

owner the fo	s of the llowing	e property located at person among us is		or the foregoing parce	n, we, the undersigned, being all of the Naples, FL 34114 do hereby certify that I, and shall remain such designated voter to the property:
N	NAME	OF AUTHORIZE	D VOTER:	(Dloose DDINT name	<u> </u>
2	SIGNA	TURE OF AUTHO	ORIZED VOTER:	(Please SIGN nai	me)
I	DATE '	THIS FORM CON	MPLETED:		
Select	t the cat	tegory below, which	n describes your form o	of ownership, and <b>sig</b>	in the appropriate places:
_	(a)	We are all natu	ral persons who are ov	wners of the above-de	scribed unit:
	Own	ner Signature	Owner Signat	ure Ov	wner Signature
_	(b)	Corporation or		mpany named	stant Secretary (or equivalent) of the parcel.
		President/Vice Pres	ident Signature	Secretary/Assi	stant Secretary Signature
_	(c)			or limited <b>Partnershi</b> pch owns the above-des	p named
		General Partner Sig	gnature		
_	(d)		of the <b>Trust</b> named _ e above-described par	rcel.	
	<u></u>		Trustee		
	Sion	ature			



Board Approved: August 9, 2023

Revision Effective: October 15, 2024

# Amenity Access Smart Phone Credentials and RFID Eligibility and Process

**Homeowners:** Homeowners <u>must obtain RFID stickers for their vehicles</u> at a cost of \$25.00 per sticker. If you already have an RFID sticker, it will still work, and you do not need to replace it. New homeowners will receive up to two (2) RFID stickers free of charge. Homeowners may also obtain amenity access smartphone credentials. Only one set of amenity credentials per homeowner will be issued. If the smartphone that the credentials are programmed to is lost, those credentials will be disabled and new credentials will be issued for the new smartphone.

Tenants: Approved tenants <u>must obtain RFID stickers for their vehicles</u> at a cost of \$25.00 per sticker. Tenants may also obtain amenity access smartphone credentials. Only one set of amenity credentials per approved tenant occupant listed on the lease and application will be issued. If the smartphone that the credentials are programmed to is lost, those credentials will be disabled and new credentials will be issued for the new smartphone. Bluetooth credentials and RFID stickers will be disabled at midnight (12:00 A.M.) on the last day of the approved application/lease. \*\*Homeowners, please note that during the lease period, all amenity access will be transferred to your tenant(s), and your access, along with the access of other residents in your home, will be disabled for the duration of the approved lease.

## **Guests:**

Long-Term Resident Guests (defined as: a person who has primary residence with a homeowner within Naples Reserve. Examples: Significant other, spouse not on the deed, adult child, or caretaker): Long-Term Resident Guests are eligible for Bluetooth smartphone credentials and RFID stickers. The requirements to obtain these credentials are:

- a. A copy of a government issued photo ID (driver's license, State issued ID, Passport) of the guest submitted by the homeowner to establish identity.
- b. Completion of registration form/attestation signed and submitted by the homeowner

- c. Proof of residency:
  - i. Government issued photo ID displaying Naples Reserve address, or
  - ii. Utility bill or bank statement reflecting Naples Reserve address

#### All other guests are not eligible for Bluetooth smartphone credentials or RFID stickers.

**Vendors:** Vendors are not eligible for Bluetooth smartphone credentials or RFID stickers. This includes but is not limited to contractors, home watch, dog groomers, realtors, etc.

\*Please note that all RFID stickers will be affixed to the vehicle by a member of the HOA Management Team upon purchase. The vehicle registration must be presented, and RFID stickers will not be issued for rental cars. This is to ensure that RFIDs are only used by individuals and vehicles authorized to be within Naples Reserve HOA. NO EXCEPTIONS.

Violations of this process are subject to fines and suspensions per the Naples Reserve HOA Fining and Suspension Policy.



# **Golf Cart Registration Form**

Unit Owner Name				
Address				
Phone		Email		
Number of Golf Car	ts			
Golf Cart 1				
Make / Model	Color	Year	Insured	l
Horn	Headlights		Taillights	
	, hereby submit a rt(s) described above. I a pertain to golf carts.			
Signature:			Date: /	′ /

## Golf Cart 2

Make / Model	Color	Year	Insured	
Horn	Headligh	ts	Taillights	
Golf Cart 3				
Make / Model	Color	Year	Insured	
Horn	Headligh	ts	Taillights	
Golf Cart 4				
Make / Model	Color	Year	Insured	
Horn	Headligh	ts	Taillights	





# **Pet Registration Form**

Unit Owner Name				
Address				
Phone		Email		
Number of Pets				
Pet 1				
Type of Pet	Name	Breed		Vaccinated
Weight	Age / I	Birthday	Micr	ochipped
l,	, hereby submi	t a pet registratio	n applicatio	n for the approval of
the pet(s) described ab				
pertain to pets.			Data	, ,
Signature:			Date:	/ /

	_	•	7
$\boldsymbol{\nu}$	P	T	•

Type of Pet	Name	Breed		Vaccinated
Weight	Age /	Birthday	Micro	ochipped
Pet 3				
Type of Pet	Name	Breed		Vaccinated
Weight	Age /	Birthday	Micro	ochipped
Pet 4				
Type of Pet	Name	Breed		Vaccinated
Weight	Age /	Birthday	Micro	ochipped



Date Received:	
Date Executed:	



## Naples Reserve HOA Long-Term Permanent Resident Form

Homeowner Information:
Homeowner's Name:
Naples Reserve Property Address:
Resident Information:
Resident Full Name:
Phone:
Email:
Relationship to Homeowner:
Age (must be 18 or over):
<u>Criteria:</u>
<b>Proof of Residency:</b> (Please attach a copy of one of the following documents)
[] * Utility Bill (showing the Naples Reserve Address and the Resident as the Customer) [] * Bank Statement (showing the Naples Reserve Address) [] Voter Registration (showing the Naples Reserve Address) [] ID (reflecting common address with the Homeowner – please provide both Resident and
Homeowner IDs)
*MUST show an actual bill or statement – not just proof that the address was changed.
<b>Proof of Identity:</b> (Please attach a copy of one of the following documents)
[ ] Copy of Driver's License/State Issued ID/Passport

**Naples Reserve HOA** 

I hereby declare that the information provided above is accurate and true to the best of my knowledge. I have provided the rules and regulations to the above-listed resident, and I understand that I, the homeowner, am responsible for any violations incurred by this resident and may be subject to fines and/or suspensions for misrepresentations on this form. I also confirm that there has been and will be no exchange of money between the homeowner and the resident that is provided with amenity access, nor is there a private lease agreement between the homeowner and the resident.

Homeowner's Signature:		
Date:		

**Note:** The information provided in this form is for verification purposes and will be kept confidential.