

Hammock Cove Association, Inc.



459 NW Prima Vista Blvd. | Port St. Lucie, FL 34983
T: 772-219-4474 | F: 772-219-4746

OCCUPANT(S) (ADD ON) APPLICATION

Please return completed package to **Signature Property Management** for processing.

A complete package includes:

- An application
- A non-refundable processing fee of \$125.00 made payable to *Signature Property*
- Copy of Driver's License
- A Criminal Background and Credit Check are required. A non-refundable fee of \$50.00 **per adult** payable to *Signature Property Management* – Canadian background check is \$95.00 **per adult**, payable to *Signature Property Management*.

If application is submitted incomplete, it will be held **uninvestigated** until the rest of the required information is received.

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OCCUPANT (ADD ON) APPLICATION

Property Address: _____ Date: _____

INFORMATION CONCERNING OWNER

OWNER NAME: _____ AGE _____ EMAIL _____

PRESENT ADDRESS: _____

PHONE: _____ SPOUSES NAME: _____ AGE: _____

INFORMATION CONCERNING OCCUPANT(S)

OCCUPANT NAME: _____ RELATIONSHIP _____ AGE: _____

OCCUPANTS NUMBER OF CHILDREN (IF ANY): _____

LIST NAMES AND AGES: _____

Please list the name & number of contact person in case of an emergency:

Name: _____ Phone #: _____

Address: _____

Name: _____ Phone #: _____

Address: _____

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NOTICE OF ACKNOWLEDGEMENT

I/We fully authorize investigation of all answers and references given.

I/We hereby agree to abide by all documents and rules and regulations of Hammock Cove Association.

Owner: _____ Date: _____

Occupant: _____ Date: _____

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OCCUPANT VEHICLE REGISTRATION FORM

Property Address: _____

Occupant(s): _____

Vehicle #1

Vehicle #2 (if applicable)

Make: _____
Model: _____
Year: _____
Color: _____
VIN #: _____
Tag #: _____
State: _____

Make: _____
Model: _____
Year: _____
Color: _____
VIN #: _____
Tag #: _____
State: _____

Vehicle(s) are registered to: _____

All information on this form must be completed.

Any changes in use or appearance of the above described vehicle(s) must be submitted to the Board of Directors with a new application.

It is clearly understood that cars must be parked in the driveway and/or garage. Parking in the street is not permitted.

Occupant: _____ Date: _____

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GENERAL AUTHORIZATION TENANT-RESIDENCY FORM

****Please present a separate page for each applicant****

Occupant(s) name: _____

Maiden name if applicable: _____

Date of birth: _____ Social Security #: _____

Present Address (street, city, state, zip): _____

Previous Address (street, city, state, zip): _____

I hereby authorize the Hammock Cove Association, to obtain and verify a social security number search, a criminal report history, and a credit check.

I agree to indemnify and hold harmless the Hammock Cove Association, their employees, officer and directors, affiliates, subcontractors, and agents from any loss, expense, or damage which may result directly or indirectly from information or reports furnished.

Occupant: _____ Date: _____

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Screening Committee Form

Date: _____ Property Address: _____

Occupant(s) Name: _____ Phone #: _____

Please circle YES or No to the following questions.

- Yes No** Do you intend to occupy the property?
- Yes No** Do you agree to live by the governing documents and other rules and regulations that govern the area?
- Yes No** Have you received the guest passes and keys assigned to the property you intend to occupy?

Have you ever been charged or convicted of any of the following:

- Yes No** Sex crime
- Yes No** Felony, Assault or Battery
- Yes No** Burglary, Auto, Dwelling, Etc.
- Yes No** DUI
- Yes No** Domestic Violence
- Yes No** Robbery
- Yes No** Grand theft
- Yes No** Kidnapping or related offense
- Yes No** Any other felony

If YES was answered to any of the above, please provide explanation: _____

Occupant(s): _____ Date: _____

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Please advise us of if you will have any animals residing in the home.

Pet(s) Yes _____ No _____ N/A _____

- The breed of dog commonly known as “pit bull” is prohibited.
- No pets shall be kept, bred, or maintained for any commercial purpose.
- Dogs which are household pets shall at all times whenever they are outside a unit be confined on a leash held by a responsible person.
- An owner shall immediately pick up and remove any solid animal waste deposited by their pet on the properties, including the common areas and the exclusive neighborhood common area.

City of Port St. Lucie Animal Control

772-871-5042

<http://www.cityofpsl.com/animal-control/animal-citations.html>

Licensing—92.40

All domestic pets over the age of 6 months old must have a City of Port St. Lucie animal license displayed on their collar. The cost for a license is \$5 for an altered animal (spay or neutered), or \$15 for an unaltered animal. Proof of current rabies vaccination from a licensed veterinarian is required, and licenses may be obtained from most Port St Lucie veterinarians, and at the Animal Control Department 1133 S.W. Macedo Blvd., or by mail.

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NOTICE OF ACKNOWLEDGMENT

AS REQUIRED by the Covenants and Restrictions, Section 8.10, A.3 (b), and the Quick Reference Guide of the Rules and Regulations

“Owner to accept responsibility for the occupancy of his “Lot”

“Owners are responsible for occupancy to comply with the Declaration of Covenants and Restrictions.

Property address: _____

Occupant (print name): _____

- *I/We agree to abide by the requirements described above.*

Owner

Date