

PINE RIDGE NORTH VILLAGE IV CONDOMINIUM ASSOCIATION INC.,
800 Sky Pine Way, West Palm Beach, FL 33415
Phone: (561) 439-4705 Fax: (561) 721-3394

NOTICE OF INTENT TO SELL OR LEASE

REQUIRED ITEMS:

- Check for \$150.00 made payable to **Pine Ridge North IV** (\$150.00 per each person over the age of 18-unless married couple)
- 3 Letters of reference
- Copy of ***Purchase Contract or Lease***
- Copy of Driver's License

This application is for: Sell (Transfer of Title)
 Lease (If Lease: Yearly or Seasonal)

In accordance with the provisions of Article 12 of the Declaration of Condominium for Pine Ridge North IV, I/We hereby serve notice that I/We desire to accept a bona fide offer made to me/us by: _____ to purchase/lease unit# _____.

If applicable, the proposed lease term would be as follows: _____ through _____ which is a period of at least three (3) months in accordance with Article 12.1(b) of the Declaration.

In the event that the Association and/or its Agent approves a lease, it is hereby authorized to act as our Agent with full power to take such action as may be required, if necessary to compel compliance by lessee(s) and/or their guests with provisions of the Declaration of Condominium, its supportive exhibits, Condominium Act, and the Rules and Regulations of the Association, or in instance of violation of any of the above by the lessee(s) and/or their guests, under appropriate circumstances to terminate the leasehold. *If this is an application for a lease, the lessor agrees to such enforcement or lease termination, whether or not such enforcement results in a lawsuit being filed.*

Enclosed with this notice is a check for \$150.00 for the screening fee and three (3) letters of reference for the applicant(s) (with a completed application).

Unless the Board notifies me/us to the contrary within fifteen (15) days from the date of receipt of this notice and all required information, I will advise purchaser/lessee and his/her application is approved.

NON-REFUNDABLE APPLICATION FEE - Applicants agree to pay \$150.00 for a non-refundable application processing fee.

DATE: _____

SIGNATURE SELLER/LESSOR: _____

SIGNATURE SELLER/LESSOR: _____

PINE RIDGE NORTH VILLAGE IV CONDOMINIUM ASSOCIATION INC.,
800 Sky Pine Way, West Palm Beach, FL 33415
Phone: (561) 439-4705 Fax: (561) 721-3394

APPLICATION FOR LEASE, GIFT DEVISE OR INHERITANCE APPROVAL

1. The attached application for occupancy and authorization forms must be completed in detail by **EACH** proposed purchaser/lessee, other than husband/wife (which is considered one applicant.)
2. If any questions is not answered or left blank, this application may be returned, not processed and not approved.
3. Please attached a copy of the lease/purchase (or estate document) to this application.
4. Please attach a non-refundable \$150.00 processing fee to this application made payable to **PINE RIDGE NORTH IV VILLAGE CONDOMINIUM ASSOCIATION, INC.** for each applicant, other than husband/wife (which is considered one applicant.)
5. The completed application must be submitted to the Association office at least 30 days prior to the desired date of occupancy (lease date).
6. All applicants must be interviewed prior to final Board of Director's approval. Occupancy prior to Board Approval is **prohibited**.
7. No lease shall be for less than 3 months nor for more than 12 months. No more than one (1) lease in a twelve (12) month period is permitted. Renewals or extensions of leases are subject to the re-approval by the Board of Directors.
8. PINE RIDGE NORTH VILLAGE IV CONDOMINIUM ASSOCIATION, INC., is a community designed and intended to provide housing for residents who are age 55 or over. **No permanent occupancy of any unit is permitted by a person under age 35.** In addition, units must be permanently occupied by at least one person age 55 or over.
9. One domestic pet allowed. Must be under 25 lbs. and Pet Registration form must be completed.
10. Use of this unit is for single family residence only. No corporation, company, partnership, or trust may lease an apartment.
11. No commercial vehicles, trucks, boats, trailers, motor homes, mobile homes, campers' recreational vehicles, Motorcycles, mopeds, etc., permitted to park on the premises overnight. Only 1 assigned parking space available per unit.
12. The owner (landlord) must provide the lessee with a copy of the Association Rules and Regulations.
13. Moving of furniture in or out of an apartment is not permitted on Sundays or Holidays. Hours for moving are from 8:00 A.M. to 5:00 P.M. Monday through Saturday.

SIGNATURE: _____ DATE: _____

**PROPOSED AMENDMENTS
TO THE DECLARATION OF CONDOMINIUM OF
PINE RIDGE NORTH VILLAGE IV, A CONDOMINIUM**

Paragraph 9, Section (a), of the Declaration of Condominium is amended to read as follows:

9. USE AND OCCUPANCY. ~~The provisions of this Paragraph 9 shall not be applicable to Sponsor or to any Corporation formed or controlled by Sponsor.~~

- a. Residential Use. Each Unit is restricted to residential use as a residence by the Owner thereof, his immediate family, guests, tenants and invitees. All similarly restricted to use by those same persons. At no time may the Unit be used by more persons than for which it was designed (5 persons in 2-bedroom convertible den units; 5 persons in 3-bedroom units; 4 persons in 2-bedroom units; 3 persons in 1- bedroom units). An owner cannot lease the apartment and leasing is prohibited during the first (1) year of his or her ownership, which commences upon the date title to the Unit is acquired. In the event the instrument of conveyance is recorded subsequent to the date title to the Unit is acquired, then the one (1) year period is extended so that it terminates one (1) year subsequent to the recording of the instrument of conveyance. In the event ownership of a Unit is transferred subject to a lease, the term of which extends beyond the date of transfer of ownership (a "pre-existing" lease), the pre-existing lease cannot be renewed or extended and, upon termination of the pre-existing lease, the unit cannot be leased for a one (1) year period commencing upon the termination date of the pre-existing lease.

(i) Notwithstanding anything to the contrary, not more than twenty percent (20%) of units can be leased at any time and leasing is prohibited, if the lease or proposed lease would result in the total number of units being leased to exceed twenty percent (20%); provided, however, this limitation does not apply to the Association or to any units under the Association's receivership.

NOTE: NEW WORDS INSERTED IN THE TEXT ARE UNDERLINED AND WORDS DELETED ARE LINED THROUGH WITH HYPHENS.

Date: _____

Signature: _____

Signature: _____

PINE RIDGE NORTH VILLAGE IV CONDOMINIUM ASSOCIATION INC.,
800 Sky Pine Way, West Palm Beach, FL 33415
Phone: (561) 439-4705 Fax: (561) 721-3394

APPLICATION FOR RESIDENCY

PLEASE PRINT OR TYPE ALL INFORMATION

DATE OF APPLICATION: _____

PURCHASE: _____ LEASE: _____ (L: _____ YEARLY _____ SEASONAL)

INHERITANCE/GIFT: _____

DURATION OF LEASE: _____ MONTHS FROM: _____ TO: _____
(MINIMUM 3 MONTHS/MAXIMUM 12 MONTHS)

PRESENT OWNERS NAME: _____

UNIT ADDRESS: _____

OWNERS TELEPHONE NUMBER: (DAYTIME) _____ (MOBILE) _____

REALTOR'S NAME & REALTY AGENCY: _____ PHONE: _____

NEW APPLICANT INFORMATION: (NOTE: NAMES MUST BE THE SAME AS TITLE/LEASE)

NAME: _____ S.S.#: _____ D.O.B.: _____

PHONE#: _____ EMAIL: _____

NAME: _____ S.S.#: _____ D.O.B.: _____

PHONE#: _____ EMAIL: _____

CURRENT ADDRESS: _____

(IF LESS THAN THREE YEARS (3) YEARS PLEASE ALSO PROVIDE PREVIOUS LANDLORD INFORMATION)

1. NAME OF LENDER OR LANDLORD: _____ PHONE#: _____

ADDRESS: _____

2. NAME OF LENDER OR LANDLORD: _____ PHONE#: _____

ADDRESS: _____

SIGNATURE: _____ DATE: _____

PINE RIDGE NORTH VILLAGE IV CONDOMINIUM ASSOCIATION INC.,
800 Sky Pine Way, West Palm Beach, FL 33415
Phone: (561) 439-4705 Fax: (561) 721-3394

APPLICATION
(CONTINUED)

LIST ALL INDIVIDUALS WHO WILL RESIDE IN THE UNIT:

NAME AND RELATIONSHIP: _____ D.O.B.: _____
NAME AND RELATIONSHIP: _____ D.O.B.: _____
NAME AND RELATIONSHIP: _____ D.O.B.: _____

HAVE YOU EVER HAD AN EVICTION FILED OR LEFT OWING MONEY TO AN OWNER OR LANDLORD?

YES: _____ NO: _____

HAVE YOU EVER HAD ADJUDICATION OR BEEN CONVICTED OF A CRIME?

YES: _____ NO: _____

NON-REFUNDABLE APPLICATION FEE - APPLICANTS AGREE TO PAY
A \$150 NON-REFUNDABLE PROCESSING FEE.

LIST VEHICLES TO BE PARKED ON PROPERTY (ENTER NUMBER OF VEHICLES HERE): _____

VEHICLE MAKE/MODEL: _____ YEAR: _____ COLOR: _____

LICENSE TAG# & STATE: _____

VEHICLE MAKE/MODEL: _____ YEAR: _____ COLOR: _____

LICENSE TAG# & STATE: _____

NOTE: COMMERCIAL VEHICLES ARE PROIBITED

APPLICANT# 1: EMPLOYER'S NAME: _____ PHONE#: _____

POSITION/TITLE: _____ MONTHLY SALARY: _____

DATES OF EMPLOYMENT: (FROM/TO) _____ OTHER INCOME: _____

APPLICANT# 2: EMPLOYER'S NAME: _____ PHONE#: _____

POSITION/TITLE: _____ MONTHLY SALARY: _____

DATES OF EMPLOYMENT: (FROM/TO) _____ OTHER INCOME: _____

SIGNATURE: _____ DATE: _____

APPLICATION
(CONTINUED)

NON-FAMILY MEMBER CHARACTER REFERENCE (PLEASE PROVIDE REFERENCES IN WRITING)

1. NAME: _____ RES. PHONE #: _____ CELL PHONE#: _____
ADDRESS: _____ ZIP CODE: _____
2. NAME: _____ RES. PHONE #: _____ CELL PHONE#: _____
ADDRESS: _____ ZIP CODE: _____
3. NAME: _____ RES. PHONE #: _____ CELL PHONE#: _____
ADDRESS: _____ ZIP CODE: _____

HAVE YOU EVER SEASONALLY RESIDED IN FLORIDA BEFORE: _____ IF YES: PLEASE
STATE THE NAME, ADDRESS AND DATES OF RESIDENCY: _____

IF RETIRED, PLEASE STATE THE COMPANY'S NAME AND ADDRESS RETIRED FROM AND WHEN
RETIRED: _____

HAVE YOU EVER BEEN CONVICTED OF OR PLED GUILTY TO A CRIME: _____ IF YES, PLEASE
STATE THE CHARGES(S) AND DISPOSITION(S): _____

1. I HEREBY AGREE FOR MYSELF AND ON BEHALF OF ALL PERSONS WHO MAY USE THE UNIT WHICH I SEEK TO LEASE:
- a. I WILL ABIDE BY ALL OF THE RESTRICTIONS CONTAINED IN THE DECLARATION OF CONDOMINIUM, BY-LAWS, RULES & REGULATIONS AND RESTRICTIONS WHICH ARE OR MAY IN THE FUTURE BE IMPOSED BY PINE RIDGE NORTH IV CONDOMINIUM ASSOCIATION INC.,
 - b. I UNDERSTAND THAT THERE IS A RESTRICTION ON PETS AND THAT I MAY NOT BRING A PET, NOR MAY ANY GUEST OR VISITOR BRING A PET INTO PINE RIDGE NORTH IV CONDOMINIUM ASSOCIATION INC., NOR ACQUIRE ONE EITHER TEMPORARILY OR PERMANENTLY AFTER OCCUPANCY WITHOUT ASSOCIATION APPROVAL.
 - c. I UNDERSTAND THAT I MUST BE PRESENT WHEN ANY GUESTS, RELATIVES, VISITORS OR CHILDREN WHO ARE NOT PERMANENT RESIDENTS OCCUPY THE APARTMENT OR USE THE RECREATIONAL FACILITIES.
 - d. I UNDERSTAND THAT SUB-LEASING OR UNAPPROVED OCCUPANCY OF THIS UNIT IN MY(OUR) ABSENCE IS PROHIBITED.

SIGNATURE: _____ DATE: _____

PINE RIDGE NORTH VILLAGE IV CONDOMINIUM ASSOCIATION INC.,
800 Sky Pine Way, West Palm Beach, FL 33415
Phone: (561) 439-4705 Fax: (561) 721-3394

APPLICATION
(CONTINUED)

1. I UNDERSTAND THAT ANY VIOLATION OF THE TERMS, PROVISIONS, CONDITIONS, AND COVENANTS OF THE PINE RIDGE NORTH VILLAGE IV, CONDOMINIUM ASSOCIATION INC., DOCUMENTS PROVIDE CAUSE FOR IMMEDIATE ACTION AS THEREIN PROVIDED OR TERMINATION OF THE LEASEHOLD UNDER APPROPRIATE CIRCUMSTANCES.
2. I HAVE RECEIVED A COPY OF THE RULES AND REGULATIONS:
YES: _____ NO: _____
3. I UNDERSTAND THAT I WILL BE ADVISED BY THE BOARD OF DIRECTORS OF EITHER ACCEPTANCE OR DENIAL OF THIS APPLICATION. **OCCUPANY PRIOR TO BOARD APPROVAL IS PROHIBITED.**
4. **I UNDERSTAND THAT THE ACCEPTANCE FOR SALE/LEASE AT PINE RIDGE NORTH VILLAGE IV, CONDOMINIUM ASSOCIATION INC., IS CONDITIONED UPON THE TRUTH AND ACCURACY OF THIS APPLICATION AND UPON THE APPROVAL OF THE BOARD OF DIRECTORS, ANY MISREPRESENTATIONS OR FALSIFICATIONS OF INFORMATION ON THESE FORMS WILL RESULT IN THE AUTOMATIC DISQUALIFICATION OF MY APPLICATION. OCCUPANCY PRIOR TO BOARD APPROVAL IS PROHIBITED.**
5. I UNDERSTAND THAT THE BOARD DIRECTORS OF PINE RIDGE NORTH VILLAGE IV, CONDOMINIUM ASSOCIATION INC., MAY CAUSE TO BE INSTITUTED AN INVESTIGATION OF MY BACKGROUND AS THE BOARD OF DIRECTORS MAY DEEM NECESSARY. ACCORDINGLY, I SPECIFICALLY AUTHORIZE THE BOARD OF DIRECTORS, JDM PROPERTY MANAGEMENT, AND WTC BACKGROUNDS & DRUG TESTING, INC. TO MAKE SUCH INVESTIGATION AND AGREE THAT THE BOARD OF DIRECTORS, OFFICERS AND MANAGEMENT OF PINE RIDGE NORTH VILLAGE IV, CONDOMINIUM ASSOCIATION, INC., ITSELF SHALL BE HELD HARMLESS FROM ANY ACTION OR CLAIM BY ME IN CONNECTION WITH THE USE OF THE INFORMATION CONTAINED HEREIN OR ANY INVESTIGATION CONDUCTED BY THE BOARD OF DIRECTORS. I AGREE TO BE GOVERNED BY THE DETERMINATION OF THE BOARD OF DIRECTORS.

APPLICANT: _____

APPLICANT: _____

SIGNATURE: _____

DATE: _____

PINE RIDGE NORTH VILLAGE IV CONDOMINIUM ASSOCIATION INC.,
800 Sky Pine Way, West Palm Beach, FL 33415
Phone: (561) 439-4705 Fax: (561) 721-3394

AGE QUALIFIED COMMUNITY CERTIFICATION

Dear Owner/Renter:

Our Community is an "adult community" and it is necessary that we maintain records to comply with HUD occupancy information. We will copy the proof of age you submitted for the screening process to meet that requirement but we also need you to complete the form below. **Thank you for your cooperation.**

Building Number: _____ Unit Number: _____

Date of Purchase /Lease: _____

Complete Ownership Status Below (check only one)

At lease on owner Is age 55

Owner is not age 55 or older

Complete Status of Occupant (check one only)

Unit for occupancy by owner age 55

Unit for occupancy by guest age 55 or over

Unit for occupancy by lessee 55 or over

Unit held for seasonal occupancy for owner age 55 or older (seasonal means 3 months or more)

Unit held for rental/investment property and owner occupancy will not exceed 72 days per year.

TO BE COMPLETED BY LESSEE ONLY:

Lease period from: _____ to: _____

Yes at least one lessee is age 55 or older

Print Name: _____ Signature: _____

Date: _____

PINE RIDGE NORTH VILLAGE IV CONDOMINIUM ASSOCIATION INC.,
800 Sky Pine Way, West Palm Beach, FL 33415
Phone: (561) 439-4705 Fax: (561) 721-3394

Exhibit "A"
Fair Housing Act - Census

Pine Ridge North Village IV Condominium Association, Inc.

I am/We are the occupant(s) of Unit No. _____ Pine Ridge North Village IV, a Condominium.

I/We understand that the Association is required by Federal law to verify the age of the occupants of the units if the Association Is to qualify for the Housing for Older Persons Exemption to the Federal Fair Housing Amendments Act of 1988 as amended.

The following information is true and correct:

a. As of the date shown on this document, there was at least one (1) person occupying the unit who was age 55 or over.

Yes: _____ No: _____

b. Please identify the current occupant(s) who is/are over 55

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

c. Please identify all other occupants:

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

I/we have provided photocopies of one of the following items (at least one must be photographic) as proof of age for each occupant for the Association's records, and the same are attached here to

Occupant 1 – Name: _____

() Birth Certificate () Driver's License () Medicare Card () Voter's Registration

() Other (specify): _____

Occupant 2 – Name: _____

() Birth Certificate () Driver's License () Medicare Card () Voter's Registration

() Other (specify): _____

PRN IV – CHECK APPLICABLE DOCUMENTS PROVIDED

_____ Yes, at least one owner is age 55 or over

Print Name: _____ Signature: _____ Date: _____

PINE RIDGE NORTH VILLAGE IV CONDOMINIUM ASSOCIATION INC.,
800 Sky Pine Way, West Palm Beach, FL 33415
Phone: (561) 439-4705 Fax: (561) 721-3394

PET REGISTRATION FORM

DATE: _____

NAME OF OWNER: _____

BUILDING#: _____ UNIT#: _____ TELEPHONE#: _____

TYPE OF PET: _____ PET LICENSE #: _____

DESCRIPTION OF PET (BREED, COLOR, WEIGHT): _____

PROOF OF ALL MEDICAL SHOTS - REQUIRED BY FLORIDA LAW:

COPY ATTACHED: YES NO

PICTURE OF PET - **REQUIRED** YES NO

WHEN WALKING DOGS ON THE GROUNDS OF THE ASSOCIATION THE
FOLLOWING RULES APPLY:

DOGS MUST BE WALKED IN DOG WALKING DESIGNATED **AREAS** ONLY

DOGS MUST BE ON A LEASH AT ALL TIME

ALL DROPPINGS MUST BE PICKED UP/BAGGED AND PLACED IN A DUMPSTER

OWNER/RENTER SIGNATURE: _____ DATE: _____

USE AND OCCUPANCY RULES AND REGULATIONS

- A. Each unit is restricted to residential use only by the unit owner, immediate family, guests, and tenants. The unit may not be used by more persons than for which it was designed, to which: five persons in 2-bedroom convertible den units, five persons in 3-bedroom units, and four persons in 2-bedroom units.
- B. All prospective owners and tenants must be screened. Guests shall register in the office.
- C. No alteration, modification, or addition may be made to any unit without the prior written approval of the Association (See Section 9(e) of the Declaration of Condominium).
- D. All units are required to have wall to wall carpeting or other flooring material with provision for soundproofing.
- E. Pets: One domestic pet per unit may be kept providing that the pet does not exceed 25 lbs. and does not create a nuisance. All pets shall be walked on a leash. All owners of pets shall pick up after their pet. No pet shall be "tied out" or left unattended on the patio or balcony. Pets should be walked on the outer perimeter of the property along the fence.
- F. No nuisance or any unreasonable annoyance to other unit owners is permitted.
- G. Age: No person under the age of 35 years may reside in any unit except to visit and no visit may exceed two consecutive months or 75 days in one calendar year. At least one occupant must be 55 years of age (See section 9U) Declaration of Condominium and Amendment to Declaration on June 5, 1989.)
- H. No person under the age of 18 is permitted to use the recreational facilities unless supervised by an adult owner or occupant.
- I. Personal property shall be stored within the unit. No personal belongings which are unsightly shall be left or stored on a balcony, porch, or other appurtenance to a unit. Nothing may be stored under the steps or in the hallways.
- J. Common elements and limited common elements shall be kept clear and free of rubbish, debris and personal articles. No laundry, linen or similar article may be hung or shaken from porches, patios or balconies.

Signature: _____ Date: _____

USE AND OCCUPANCY RULES AND REGULATIONS
(continued)

- K. All trash must be tied up in plastic bags for disposal in dumpster.
- L. Parking: No vehicle which cannot operate on its own may remain on the property. No repair, except in an emergency, shall be made to a vehicle on the premises. No boat, camper or recreational vehicle shall be kept on the property. (See section 11.3 (I) or Bylaws). No commercial vehicles may be parked overnight.
- M. Each occupant of a unit must park in their designated parking space. Guest parking is on a first come, first serve basis. Owners must have a parking permit and any guest staying more than 3 days must get a temporary permit. Any worn or yellowed permits must be replaced.
- N. No cooking or fires on patios or balconies are permitted. No eating or beverages are permitted in areas other than those areas specifically designated for such.
- O. The Association must retain a pass key to all units. Each owner or occupant of a unit must provide a key to the office for access in case of an emergency.
- P. After the Closing, new owners must go to the Association office to obtain parking permits for their vehicle(s).

ALL OWNERS WHO ARE RENTING MUST SHARE THESE RULES AND REGULATIONS WITH THEIR TENANTS.

PLEASE NOTE: These rules are only summary in nature. A full explanation of each can be found in the Declaration of Condominium. Each owner/occupant is responsible for abiding by these and all other rules as described In the Declaration.

Signature: _____ Date: _____

PINE RIDGE NORTH VILLAGE IV CONDOMINIUM ASSOCIATION INC.,
800 Sky Pine Way, West Palm Beach, FL 33415
Phone: (561) 439-4705 Fax: (561) 721-3394

POOL AND SPA RULES AND REGULATIONS

1. ALL PERSONS USING THE POOL AND/OR SPA DO SO AT THEIR OWN RISK. THE ASSOCIATION IS NOT RESPONSIBLE FOR ACCIDENTS OR INJURIES.
2. OWNERS MUST INFORM THEIR FAMILIES/GUESTS/TENANTS ABOUT ALL RULES.
3. POOL AND SPA HOURS ARE BETWEEN 8:30 A.M. AND 10:00 P.M. THE BOARD OF DIRECTORS MAY CHANGE THESE HOURS AS DEEMED NECESSARY.
4. ALL BATHERS MUST SHOWER BEFORE ENTERING THE POOL OR SPA.
5. PERSON WITH INFECTIOUS OR CONTAGIOUS DISEASES ARE NOT PERMITTED TO USE THE POOL OR SPA.
6. NO SOAP OF ANY KIND MAY BE USED AT THE SHOWER OR IN THE POOL.
7. NO FLOATS, AIR MATRESSES, OR LIKE TOYS ARE PERMITTED IN THE POOL OR POOL AREA.
8. NO RUNNING OR BALL PLAYING IS ALLOWED. NO SKATEBOARDS OR SKATES ARE PERMITTED IN THE POOL AREA.
9. **NO CHILD UNDER THE AGE OF 3 OR CHILDREN NOT TOILET TRAINED REGARDLESS OF AGE ARE PERMITTED IN THE POOL.** NO PERSON UNDER 12 YEARS OF AGE IS PERMITTED ON THE DECK OR IN THE POOL UNLESS ACCOMPANIED BY AN ADULT.
10. PROPER SWIM-WEAR IS REQUIRED TO ENTER THE POOL. NO CUT-OFFS ARE PERMITTED.
11. NO DIVING OR JUMPING IN THE POOL PERMITTED.
12. NO ANIMALS ARE PERMITTED IN THE POOL AREA.
13. POOL CHAIRS MUST BE COVERED WITH A TOWEL WHEN SUNTAN OIL IS USED.
14. POOL CHAIRS CANNOT BE RESERVED AT ANY TIME.
15. FOOD AND BEVERAGES ARE PROHIBITED IN THE POOL AND ON THE POOL DECK.
16. ALL SMOKING MATERIALS MUST BE DISPOSED OF IN THE APPROPRIATE DISPOSAL CONTAINERS.

PINE RIDGE NORTH VILLAGE IV CONDOMINIUM ASSOCIATION INC.,
800 Sky Pine Way, West Palm Beach, FL 33415
Phone: (561) 439-4705 Fax: (561) 721-3394

***ALL OWNERS WHO ARE RENTING MUST SHARE THESE RULES AND REGULATIONS WITH
THEIR TENANTS.***

PLEASE NOTE: These rules are only summary in nature. A full explanation of each can be found in the Declaration of Condominium. Each owner/occupant is responsible for abiding by these and all other rules as described In the Declaration.

Signature: _____ Date: _____

PINE RIDGE NORTH VILLAGE IV CONDOMINIUM ASSOCIATION INC.,
800 Sky Pine Way, West Palm Beach, FL 33415
Phone: (561) 439-4705 Fax: (561) 721-3394

TENNIS COURT RULES AND REGULATIONS
(SHUFFLEBOARD AND BOCCE)

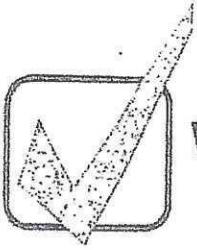
- A. PROPER TENNIS ATTIRE REQUIRED, TENNIS SHOES MUST BE WORN.
- B. *BATHING SUITS, BARE CHESTS PROHIBITED.***
- C. PROFANITY/YELLING PROHIBITED.
- D. ROLLER SKATES, BICYCLES OR THE LIKE PROHIBITED ON TENNIS COURTS
- E. COURT TIME IS LIMITED TO 1 HOUR, UNLESS THE FOLLOWING HOUR IS NOT RESERVED.
- F. SIGN-UP ONE DAY IN ADVANCE 8:00 A.M. - 5 P.M.
- G. ERASING OF SIGN-UP BOARD IS PROHIBITED.**
- H. COURT USE IS LIMITED TO RESIDENTS AND THEIR GUESTS. THE BOARD OF DIRECTORS MAY GRANT USAGE BY NEIGHBORING VILLAGES WHEN DEEMED APPROPRIATE.
- I. NO ALCHOLIC BEVERAGES ARE PERMITTED ON THE TENNIS COURTS.
- J. COURT HOURS ARE 8:00 A.M. - 10:00 P.M. PLAYERS ARE RESPONSIBLE FOR LOCKING THE GATE AND TURNING OFF THE LIGHT AFTER PLAY.
- K. **TEN MINUTE RULE:** RESERVED COURT TIMES ARE FORFEITED IF ARRIVING MORE THAN 10 MINUTES LATE.
- L. GATE KEY IS AVAILABLE IN THE OFFICE
- M. **OPEN TENNIS PLAY:** DESIGNATED DATES AND TIMES ARE RESERVED FOR THIS PURPOSE DURING PEAK SEASON - JANUARY 15TH TO MARCH 31ST.
- N. ALL PLAYERS SHALL USE PROPER ETIQUETTE WHEN ON THE COURTS.

SHUFFLEBOARD AND BOCCE EQUIPMENT IS ALSO AVAILABLE IN THE CLUBHOUSE. ALL EQUIPMENT MUST BE RETURNED AFTER EACH USE.

ALL OWNERS WHO ARE RENTING MUST SHARE THESE RULES AND REGULATIONS WITH THEIR TENANTS.

PLEASE NOTE: These rules are only summary in nature. A full explanation of each can be found in the Declaration of Condominium. Each owner/occupant is responsible for abiding by these and all other rules as described In the Declaration.

Signature: _____ Date: _____



WTC Backgrounds & Drug Testing, Inc.

"We're The Choice!"

ACTION REQUEST

Rental Package [Credit,Criminal & Evictions]	Employment Verification
Criminal History .FL Out Of State [Include state address] Nationwide	SSN Verification
F.D.L.E. [Florida Department Of Law Enforcement]	Sexual Offender Search FL Nationwide
DL Records/History Include DL #: 3 Year 7 Year	Credit Report [Stand Alone]
FACIS	Education Verification

Last Name, First Name, MI.

Address

City, State & Zip Code

Email Address

DOB

Sex

SSN

Driver's License Number & State

PINE RIDGE NORTH VILLAGE IV

N/A

Company

Company Fax.

Applicant Release

For employment and/or residency, I understand that investigative background inquiries are to be made on me including consumer credit, criminal conviction, motor vehicles, and other reports. I further understand that WTC Backgrounds & Drug Testing, Inc. will be requesting information from various state and other agencies which maintain records about my history. These records include, but are not limited to, driving, credit, criminal, and civil history.

I authorize any party or agency contacted by WTC Backgrounds & Drug Testing, Inc. to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. This authorization and consent shall be valid in original, fax, or copy form.

APPLICANT SIGNATURE

DATE

1897 PALM BEACH LAKES BLVD. ♦ SUITE 222. ♦ WEST PALM BEACH, FLORIDA ♦ 33409

OFFICE: 561-688-9991 ♦ FAX: 561-370-6850 ♦ WWW.WTCBACKGROUNDS.COM

***When emailing requests, please transmit to: reports@wtcbkgnd.com ***