

**JOG ESTATES PROPERTY OWNERS ASSOCIATION,
INC. C/O GRS COMMUNITY MANAGEMENT
3900 WOODLAKE BLVD., SUITE 309
LAKE WORTH, FLORIDA 33463
PHONE (561) 641-8554
FAX (561) 641-9448**

PURCHASE APPLICATION FORM

JOG ESTATES PROPERTY OWNERS ASSOCIATION, INC. CRITERIA for TRANSFER or SALES of LOTS and HOMES

In accordance with Article X of the AMENDED AND RESTATED DECLARATION OF COVENANTS AND RESTRICTIONS FOR JOG ESTATES PROPERTY OWNERS ASSOCIATION, INC., the following rules and guidelines apply as involving the sale/transfer of a Lot/Home:

1. All transfers of title and/or purchases, excepting the transfer of title by way of (i) devise, (ii) inheritance, or (iii) as a result of estate planning whereby the prior Owner maintains a beneficial interest in the Lot, are subject to an approval process with the Board of Directors responsible for the decision to approve or deny any such transfers of title and/or purchase based upon the following procedures and criteria.
2. All completed applications must be submitted to the then existing property manager of the Association. Applications submitted within 30 days prior to the transfer/sale of a Lot/Home may be denied. A capital contribution check to the Association in an amount equal to three (3) months of regular Assessments then being charged to such new Owners, and any application fees payable to the management company per the Association's contract with the management company must be paid according to the management company's procedures.
3. If a completed application and all requested additional information/documentation are not received at least thirty (30) days prior to the transfer/sale of a Lot/Home, the application may be denied.
4. The following criteria must be fully and unequivocally satisfied as reasonably determined by the Association for all applications involving the transfer/sale of a Lot/Home:
 - a. The application must contain correct, accurate and complete information otherwise the application shall result in a denial.
 - b. The Unit Owner must be current regarding all assessments, maintenance, dues, fines, attorneys' fees, and/or any other monetary obligations to the Association.
 - c. The Unit Owner must not be in violation of any of the Declaration of Covenants and Restrictions, as amended, Rules and Regulations, or any aspect of the governing documents of the Association.
 - d. The proposed owner/occupants, who are the subject of the application for transfer/sale of a Lot/Home, must not have engaged in criminal activity as evidenced by a conviction or plea arrangement for a felony within the last ten years as involving a crime of violence, sexual misconduct, theft, or other crime of moral turpitude involving injury, loss of life, or loss of damage to property.
 - e. The proposed owner(s) must not have been deemed to be a frequent violator (as defined by having received more than 4 violation notices in any year) of any other community associations' rules, regulations, and/or governing documents within the past ten (10) years and/or have had fines imposed against them by any such community association for a violation of any such community associations' rules, regulations, and/or governing documents more than 4 times within the past ten (10) years.
 - f. Any such proposed owner/occupant must not be on the sex offender list.
5. The average credit score of each proposed owner must be at least 670 utilizing the credit scores provided by the three major credit reporting agencies or other reliable source; and
6. Any such proposed owner must not have filed an individual bankruptcy petition within the past seven (7) years.

Process

1. Obtain and read the Jog Estates Property Owners Association Inc. controlling documents and board of director promulgated rules and the criteria for transfer or sale of lots or homes (provided above).
2. Complete the application form.
3. Pay the Capital Contribution in the amount of 3 months Jog Estates POA owner assessment payable by check or money order made payable to Jog Estates Property Owners Association, Inc. to be collected at CLOSING.
4. Pay the administration processing fee to GRS Community Management which currently is a charge of \$200 or the maximum allowable under state statute as a processing fee to each applicant. Maximum of 2 applicant charges per application.
5. Provide a copy of the purchase contract and the completed application form to GRS.
6. Participate in a 15-minute phone orientation conducted by GRS.
7. Approval or denial by Jog Estates POA Board Of Directors.
8. Be aware that the Unit Owner must be current regarding all assessments, maintenance, dues, fines, attorneys' fees, and/or any other monetary obligations to the Association or the transfer/purchase will be denied. And The Unit Owner must not be in violation of any of the Declaration of Covenants and Restrictions, as amended, Rules and Regulations, or any aspect of the governing documents of the Association or the transfer/purchase will be denied.
9. After closing notify the GRS property manager who will then provide you with information regarding the community website, password and will update the gate code box. Have your title company forward a copy of your warranty deed along with the buyer's legal mailing address and phone number to the Management Company, immediately following the close of the sale. **The Management Company will not amend their records, recording a new owner, without the Warranty Deed.**
10. It is your obligation to make sure that the mailing addresses and telephone numbers are kept up to date with the management company and the Secretary of Jog Estates POA.
11. The homeowner monthly assessment is due in advance on the first day of each month. ACH forms are available online at the management company's website: www.grsmgt.com under the forms tab.

If you have any further questions concerning the Homeowners Association, please contact GRS Community Management at (561) 641-8554. You can also visit the Jog Estates site <https://www.grsmgt.com/association/jog-estates/>

PURCHASE APPLICATION FORM (Cont.)

The application must contain correct, accurate and complete information otherwise the application shall result in a denial. Should the question not apply, answer "N/A". Print complete mailing addresses, including zip codes.

All supplied information must be legible.

Address of home to be purchased:

Expected Closing Date:

Complete the form below for all purchasers.

Name	Land Line Phone	Cell Phone	Email Address

In case of emergency please notify:

Name	Land Line Phone	Cell Phone	Email Address

PURCHASE APPLICATION FORM (Cont.)

Agreement To Abide By Governing Documents And Rules/Regulations

MUST BE COMPLETED BY EACH BUYER

If you purchase a unit in Jog Estates, you will become a member of Jog Estates Property Owners Association, Inc. Owners, residents, leasees, and guests must abide by Association's Documents (Declaration, Bylaws, Articles of Incorporation) and Rules and Regulations set forth by the Association's Board of Directors.

1. I certify that I agree abide by the Associations Documents as recorded in the Palm Beach County Official Records and to abide by the Rules and Regulations as set forth by the Association's Board of Directors.
2. I certify that I agree to care for all trees, bushes, plants and other items, other than sod, that previous owners have installed on common areas adjacent to the home you are purchasing. If the items are in a common area between two homes, then the owner(s) of the home the items are closest to is responsible for such items. Care includes trimming, pruning, fertilization, and removal of these items in the event they need to be removed, and payment for any damage these items may cause to common area property. **Jog Estates POA, Inc. has not installed any plant materials or other items on common area property adjacent to owner's homes other than the perimeter fence.**
3. I do **not** object to any background checks (which may include credit, criminal records, and past violations/fines in other communities) that may be performed.
4. I certify that I have **NOT** engaged in criminal activity as evidenced by a conviction or plea arrangement for a felony within the last ten years as involving a crime of violence, sexual misconduct, theft, or other crime of moral turpitude involving injury, loss of life, or loss of damage to property. Nor that I am required to register as a sexual predator or offender in any jurisdiction.
5. I certify that I have **NOT** received more than 4 violation notices in any year of any other community associations' rules, regulations, and/or governing documents within the past ten (10) years and/or have had fines imposed against them by any such community association for a violation of any such community associations' rules, regulations, and/or governing documents more than 4 times within the past ten (10) years.
6. I certify that I have **NOT** filed an individual bankruptcy petition within the past seven (7) years.
7. I certify that my credit score is at least 670 utilizing the credit scores provided by the three major credit reporting agencies or other reliable source.

Buyer Name:

Signature:

Date:

MUST BE COMPLETED BY EACH BUYER

PURCHASE APPLICATION FORM (Cont.)

AGE VERIFICATION CERTIFICATE

The following information must be furnished by the purchaser(s) of each unit so that the Jog Estates HOA may monitor the percentage of residences occupied by at least one person 55 years of age or older in order to preserve the status of Jog Estates POA as a 55+ age community in compliance with the Jog Estates governing documents, and the Federal Fair Housing Act.

Lot #: _____ Address: _____

Purchasers:

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Occupant(s) including purchaser(s):

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Please attach a copy of a driver's license (or other proof of age) for EACH person listed above.

If owners and/or occupants change you must notify GRS Community Management and the Secretary of Jog Estates POA within 15 days of such a change. To remove a deceased person from GRS records a death certificate must be provided.

PURCHASE APPLICATION FORM (Cont.)

Vehicle Registration

Jog Estates has certain vehicle restrictions (refer to the Declaration for specific language regarding this requirement).

Make: _____ Model: _____ Lic. Tag: _____

Make: _____ Model: _____ Lic. Tag: _____

Make: _____ Model: _____ Lic. Tag: _____

Make: _____ Model: _____ Lic. Tag: _____

PURCHASE APPLICATION FORM (Cont.)

Seasonal Resident Information

If you are a seasonal resident, we need your alternate address and contact information on this form.

If you are not a seasonal Resident type or write NA here _____.

Name: _____

Alt. Address: _____

Phone Number: _____

E-mail Address: _____

If you want mail from GRS Community Management and/or Jog Estates to go to your non-Jog Estates address indicate this below.

_____ (check here). **YES, I want mail from GRS Community Management and/or Jog Estates to go to the address I provided above.**

PURCHASE APPLICATION FORM (Cont.)

PET REGISTRATION FORM

I (we) agree to abide by the pet restrictions as documented in the Jog Estates controlling documents and rules/regulations promulgated by the board of directors.

Type and Breed of Pet: _____

Color of Pet: _____

Name of Pet: _____

Type and Breed of Pet: _____

Color of Pet: _____

Name of Pet: _____

If you do not have any pets write NA here: _____

PURCHASE APPLICATION FORM (Cont.)

Gate Call Box Information

Jog Estates has a call box next to the guardhouse (no guard is present). Vendors and guests can request entry by looking up the resident's name, and then having the call box dial the resident's phone. The resident can speak to the person and then press 9 to open the vehicle gate.

Last name and first initial(s) to program into the call box: _____
(at this time only 1 name per home may be entered)

Phone number for call box to call: _____
(at this time only 1 phone number per home may be entered)

YOU MUST NOTIFY GRS THAT YOU HAVE CLOSED ON THE HOME AND REQUEST THAT THE GATE CALL BOX INFORMATION BE CHANGED.

PURCHASE APPLICATION FORM (Cont.)

Communication Preferences

COMPLETE FOR EACH RESIDENT

I agree to permit GRS Community Management to contact me by email. Yes No

I agree to permit Jog Estates to contact me by email. Yes No

I agree to have the following published in the Jog Estates community directory which is distributed **only** to residents of Jog Estates and GRS: Yes No

Name:

Address of home to be purchased:

Phone Number – Land Line: _____ Yes No

Phone Number – Cell phone: _____ Yes No

Email Address: _____ Yes No

Complete a SEPARATE FORM For Each Resident

PURCHASE APPLICATION FORM (Cont.)

If this application is not legible or is not completely and accurately filled out THE APPLICATION WILL BE DENIED.

GRS Community Management and the Association will not be liable or responsible for any inaccurate information in the investigation and related report to the Association caused by such omissions or illegibility.

By signing, the applicant recognizes that the Association or their Agent, GRS Community Management, may investigate the information supplied by the applicant and a full disclosure of pertinent facts may be made to the Association.

I UNDERSTAND THE REQUIREMENTS AND OBLIGATIONS AS SET FORTH IN ALL PRECEDING PAGES AND AGREE TO COMPLY WITH THE SAME.

Property Address: _____ Date: _____

Purchaser: _____
Signature Print Name

Purchaser: _____
Signature Print Name

Purchaser: _____
Signature Print Name

Purchaser: _____
Signature Print Name

Purchaser: _____
Signature Print Name

AUTHORIZATION FILE DISCLOSURE

APPLICANT CONSENT

I, hereby consent to allow Verify Screening Solutions, Inc., through its designated agent/employee, to obtain and verify my consumer reports, including but not limited to, my credit report, criminal information, and eviction information for the purpose of determining my eligibility to lease/purchase an apartment. I further understand if I lease/purchase an apartment, I consent to allow Verify Screening Solutions, Inc. and its designated agent/employee, for the duration of my lease, to review the following list of information to assess risk, for analytics, for process improvement, and other uses: my consumer reports, including but not limited to my credit report, criminal information, eviction information, my rental payment history, and occupancy history, and other information. The facts set forth in my application for residency are true and complete. False, fraudulent, or misleading information on an application may be grounds for denial of residency or subsequent eviction.

Signature

Date

Printed Name

Date of Birth

Social Security Number

Driver's License Number

State

2nd Applicant's Signature

Date

Printed Name

Date of Birth

Social Security Number

Driver's License Number

State

ADDITIONAL OCCUPANTS OVER 18, AUTHORIZATION FORM IS REQUIRED