THE BRIDGES HOMEOWNERS ASSOCIATION C/O G.R.S. MANAGEMENT 3900 WOODLAKE BLVD., SUITE 309 LAKE WORTH, FL 33463 PHONE 561-641-8554 FAX 561-641-9448

APPLICATION FOR SALE

Submit completed package to GRS Management, address above

- () \$200.00 processing fee, check made payable to GRS Management
- () \$100.00 processing fee, check made payable to The Bridges HOA
- () Pictures of Vehicles and Pets (if applicable) attached
- () Completed contract attached
- () Copy of drivers license and vehicle registration

HOA ORIENTATION & APPROVAL REQUIRED Prior to Closing

Property Manager email mcutchens@grsmgt.com

All Documents MUST be submitted to GRS Management prior to appointment.

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TO:ALL NEW OWNERSFROM:THE BOARD OF DIRECTORSRE:ASSOCIATION

Please be advised that as a New Owner at The Bridges you are now a member of the Homeowners Association. This memorandum is to advise you of your responsibilities as a member of the Association.

- 1. As a member of the Association you are agreeing to abide by the Association Documents as recorded in the Palm Beach County Official Records. And to abide by the Rules and Regulations as set forth by the Associations Board of Directors. If you have not received a copy of these documents from the Seller of your home, they are available to you from GRS Management for a fee of \$75.00
- 2. Pet Restrictions: Article X, USE RESTRICTIONS Section 6. ANIMALS AND PETS, page 47. In the Declaration of Covenants, Restrictions and Easements for The Bridges.
- 3. Make sure that your Title Company has verified that the Homeowner fees on your new home have been paid. These fees are a lien against your home, and you could be responsible if they are outstanding.
- 4. Make sure your Title Company forwards a copy of your Warranty Deed to GRS Management. This must be done in order for the home to be transferred to your name in the official records of the Association. *The management company will not change the name on the official records without receiving this information, which in turn could hold up any correspondence concerning Association matters from reaching you.*
- 5. It is your obligation to make sure that mailing addresses and telephone numbers are kept up to date with the management company.
- 6. Homeowner fees are due in advance on the first day of each quarter (January, April, July and October). A statement will be mailed to you as a courtesy prior to the time the fees even if the statement is not received by you. If you do not receive a statement, please call GRS Management.

Should you have any further questions concerning the Homeowners Association, please feel free to contact GRS Management @ 561-641-8554 and they will be happy to assist.

I UNDERSTAND THE REQUIREMENTS AND OBLIGATIONS AS SET FORTH ABOVE AND AGREE TO COMPLY WITH THE SAME.

Purchaser:	(Signature)	Purchaser:	(Signature)
Purchaser:	(Signature)	Purchaser:	(Signature)
PROPERTY	ADDRESS:		

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APPLICATION FOR SALE

Property Address	
Owner	Phone
Name of Buyer	
Name of Buyer	
Current Address	
Phone number for contacting	
Place of Employment	
Employers Address	
Position	Phone
Additional Info	

Vehicles are not to park on the street over night or block sidewalks. Commercial vehicles must be parked inside the garage. A picture of each vehicle listed on the application must accompany the application. Vehicle Info:

Make	Model	Year	License#	State	Color
Make	Model	Year	License#	State	Color

Any Pets? _____ Yes _____ NO if yes, please list _____

(Please include a photo of any dogs or cats that will be at the residence)

*All pets must be kept on a leash when not on owner's lot. Please clean up after your pet on your neighbor's property or HOA common areas.

Initials: _____

*Do not make any change or alterations to your home without approval of the Architectural Committee. Initials: _____

*Trash is picked up on Tuesday and Friday. Recyclables are picked up on Friday. Yard Waste is picked up on Friday. Garbage Cart and Recycle bins are to be kept inside the garage. Initials: _____

It is understood that property will be occupied only by buyer and members of the family listed:

Name

Name

I authorize The Bridges Homeowners Association to make inquiry of any of the above information.

Date