

PRINT OR TYPE ALL INFORMATION ON THESE FORMS

Date: _____

Lot No: _____

Unit Address: _____

NAME: _____

Email Address: _____

Cell Phone #: _____

Current Owner's Name _____ **Phone #** _____

Name of Realtor Handling Sale _____ **Phone #** _____

Attorney/Title Company Handling Closing _____ **Phone #** _____

NAME of Prospective Purchaser (as Title will appear):

a. _____ **b.** _____

MORTGAGE INFORMATION: (If home will be mortgaged):

Name of Lender _____ **Phone #** _____

Address _____

APPROXIMATE CLOSING DATE: _____

OTHER PERSON WHO WILL OCCUPY THE UNIT WITH YOU:

Name

Age

Relationship/Occupation

***OAKWOOD MANOR HOMEOWNER'S
ASSOCIATION OF SARASOTA, FL. INC.***

Please read this upon **signing** a contract. If you have any questions, ask before signing.

Oakwood Manor is a Homeowner's Association, and as such, is governed by the Documents of the Association at the time of Incorporation.

This is a Cooperative Association, and as such, is also governed by Florida State Statue Chapter 719, the Association Documents and Roberts Rules of Order.

With the exception of the Rules and Regulations, these Documents can only be changed by a vote of the Owners.

The Rules and Regulations may be changed or modified by a majority vote of the Board of Directors at a Board of Directors Meeting.

Before you can close on a purchase, you will have a meeting with a Representative of the Board of Directors. You will be asked to sign forms stating you have read and understand the Documents and Rules and Regulations and agree to abide by them. At that time you will be asked to sign a form agreeing to pay any and all legal expenses incurred by the Association of your violation of any of the Association's Documents and Rules and Regulations.

Transfer of Membership Certificate **MUST** be completed by Harlan Doinber. Without the Membership Certificate (land share) you have no rights and privileges as a member and the home will have a clouded title going forward.

Harlan R. Doinber, Esquire
Law Office of Harlan R. Doinber, P.A.
3900 Clark Road, Suite L-1
Sarasota, FL 34233
(941) 923-9930/(800) 804-9930
Fax: (941) 923-3400
E-mail: hdoinber@aol.com

**OAKWOOD MANOR HOMEOWNER'S
ASSOCIATION OF SARASOTA, FL. INC.**

3330 Fruitville Road
Sarasota, Florida 34237
Phone: (941) 366-2880
Fax: (941) 954-5661

Real Estate Sales Process
For Brokers, Agents and Private Sales
All Sales Must Use This Procedure

**All land, including all lots, streets and common areas are the property of
Oakwood Manor Homeowner's Association of Sarasota, Inc.**

After due process on all approved sales, buyers will receive a Proprietary Lease for the lot. The homes must have a setback from the street concrete gutter line of 10-feet. There is a 10-foot setback at the back of the home and a 5-foot setback on each side of the home. The exterior of the home, carport, storage shed and any attachment is included in the outside measurement of the home.

1. A non-refundable check for \$100.00 for a process fee made payable to Oakwood Manor Homeowners Association, Inc. shall be submitted.
2. The application form, sales contract, check and information sheet, along with the legible copy of the buyer's driver's license to be turned into the Association office.
3. Allow twenty (20) to thirty (30) days to process the application.
4. After the application has been processed an orientation date and time will be set up with the buyer/s.
5. After the orientation meeting, the applicant will be notified if they are approved or disapproved.
6. If approved, the closing attorney will be faxed the approval form.

Information and Suggestions

1. Read the Rules & Regulations and the By-Laws in. your blue book
2. We have many activities in the park. done by volunteers, and you are welcome to join any of them.
3. We have in-house TV. Channel 2 has all the activities, and other notices posted.
4. Name tags are given to new Owners. Wear them to all functions so people will learn your name.
5. Attend annual meetings and the election of Board members. Vote for Board members who will consider what is best for the Park and you, the owners, if you cannot be present to vote, mail, or give your proxy to the Association Secretary with your wishes known. Please help us help you.
6. There are 9 Board members; are elected for 3-year terms. Three are elected each year. If you so desire, you may submit your resume by the first Friday in December and run for a seat on the Board of Directors.
7. The Manager handles the day-to-day operations of the Park; all questions or complaints are to be directed to the Manager or the office staff.
8. As in all communities some love to start rumors. If you are unsure about something you hear, come to the office or Board meetings and get the facts.
9. The Board meetings are open to all residents to observe.
10. There is a suggestion box outside of the office for any suggestions you may have.
11. You may need to check the forms in the rack outside of the office for various types of forms.
12. ACH - Automatic draft from your bank to pay the monthly fee. It costs the Association time and money to handle checks. Help to save money. You are the owner of the Association.
13. Ride bicycles with traffic and use lights after dark.
14. Walk facing the traffic and use a flashlight after dark.
15. If you are going north during the summer months, plan for someone to trim your bushes and plants. Pick all the fruit and trim trees 4 feet from the ground for the mowers if you have a fruit tree.
16. Empty and store inside all outside receptacles that hold water, including birdbaths. Mosquitoes breed in them; summer is the rainy season in Florida.
17. Due to hurricanes, store all outside loose items inside your shed or home. Drop your awnings. Leave a door key with your caretaker.
18. Inform the office of the date when you plan to leave. Along with the date you plan to return and if you have given permission to anyone to use your home during your absence.

**OAKWOOD MANOR HOMEOWNERS ASSOCIATION
OF SARASOTA, FL, INC.**

3330 Fruitville Rd.

Sarasota, FL 34237-9022

Phone: (941) 366-2880

Fax: (941) 954-5661

Date:

Dear Member:

As you know, Oakwood Manor is a cooperative that is subject to restrictions contained in the cooperative documents. The restrictions were created as a means of protecting our property values and quality of life. Without enforcement, the restrictions are meaningless. The Association is therefore resolved to uphold the restrictions, by persuasion where possible and by litigation where necessary.

However, our attorneys have advised us that the law does allow the Association to obtain enforcement on an ongoing basis against all new violations, after a notice such as this letter, while preserving the Association's right to also enforce against other recent and egregious violations.

This, therefore, is what our attorneys call our "clean slate" Letter to homeowners.

Please be advised that any violation of any of the Oakwood Manor cooperative documents which occurs and comes to the attention of the Association at any time after the date of this letter will result in all necessary enforcement action by the Association.

The Association will also pursue enforcement against any other violation which is of a character more egregious than is more severe, than the violations which generally occurred in the past or which otherwise can be distinguished from the broader violations at large.

Although this notice applies to all document restrictions, specific notes should be made of the restriction regarding exterior unit alterations. Article 18 of the Proprietary Lease prohibits a member from making any alterations to a unit or additions to the manufactured home presently located upon the unit or its fixtures and appurtenances without first obtaining the written consent of the Association.

Please be certain to comply with these and other cooperative document restrictions, strictly and without exception. The Association is monitoring all of Oakwood Manor to identify any new violations and to compel compliance in all cases, first by notices and then by formal enforcement action where necessary. If you become aware of a violation, please inform us, with the address, date, and description of the violation. You do not have to provide your name to report a violation.

We and your neighbors will appreciate your cooperation and support in the Association's efforts to enforce the cooperative document restrictions, once and for all, for the purpose of preserving Oakwood Manor as a quality community in which to live and own. Thank you for doing your part.
Sincerely,

New Membership Director

OAKWOOD MANOR HOMEOWNERS ASSOCIATION OF SARASOTA, FL, INC.

FREQUENTLY ASKED QUESTIONS AND ANSWERS SHEET

January 1, 2025

Q: What are my voting rights in the cooperative association?

A: One vote per unit.

Q: What restrictions exist in the cooperative documents on my right to use my unit?

A: No illegal or commercial use. All alterations must be approved by the Board of Directors. Occupancy is generally limited to two (2) persons, one of whom must be at least 55 years of age and the other or whom must be at least 45 years of age. No pets are allowed. For a complete listing of the restrictions, consult the Bylaws, Master Form Proprietary Lease and the Parks Rules and Regulations.

Q: What restrictions exist in the cooperative documents on the leasing of my unit?

A: A unit may be rented for a minimum term of three (3) months and a maximum term of six (6) months. Only one rental permitted each year. All leases are subject to the prior approval of the Board of Directors. Tenants must comply with the community's age restrictions. The cooperative association may collect a security deposit to protect its property equivalent to one month's rent. For a complete listing of the restrictions, consult the Bylaws, Master Form Proprietary Lease and the Park's Rules and Regulations.

Q: How much are my assessments to the cooperative association for my unit type and when are they due?

A: All unit owners are required to pay the same monthly maintenance fee, which is presently \$190.00 per month (including \$33.00 towards a general reserve account). Maintenance fees are due on the first day of each month and are subject to late payment charges after the 5th day of the month.

Q: Do I have to be a member in any other association?

A: No

Q: Am I required to pay rent or land use fees for recreational or other commonly used facilities?

A: No.

Q: Is the cooperative association or other mandatory membership association involved in any court cases in which it may face liability in excess of \$100,000?

A: No

NOTE: THE STATEMENTS CONTAINED HEREIN ARE ONLY SUMMARY IN NATURE. A PROSPECTIVE PURCHASER SHOULD REFER TO ALL REFERENCES, EXHIBITS HERETO, THE SALES CONTRACT, AND THE COOPERATIVE DOCUMENTS.

OAKWOOD MANOR HOMEOWNER'S ASSOCIATION OF SARASOTA, FL, INC.

**3330 Fruitville Rd.
Sarasota, FL 34237-9022
Phone: (941) 366-2880
Fax: (941)-954-5661**

CERTIFICATE OF REVIEW OF COOPERATIVE DOCUMENTS AGE COMPLIANCE AND OCCUPANT REQUIREMENTS

We, the undersigned prospective purchasers of a membership certificate in Oakwood Manor Homeowner's Association of Sarasota, Inc., a Cooperative (herein, "Oakwood Manor") certify that we have received and read the Master Form Proprietary Lease, the Articles of Incorporation, Association Bylaws, Association Rules and Regulations, the Frequently Asked Questions and Answers Sheet and all amendments to those documents, and fully understand their terms and conditions. We further agree to fully comply with those documents and any future amendments.

We will ____ will not ____ become a member of the household that will reside at the below referenced unit in Oakwood Manor. We hereby certify that we have personal knowledge of the ages of all the persons who will occupy this unit and that at least one such occupant is 55 years of age or older and the other occupant is at least 45 years of age or older. We understand that no more than two (2) adult occupants are permitted per home, pursuant to Article 2.8 of the Bylaws and Article 15 of the Master Form Occupancy Agreement.

Dated this ____ day of _____

Unit Number: _____

PROSPECTIVE PURCHASERS
(All prospective purchasers must sign this Certificate)

SIGN: _____

PRINT: _____

SIGN: _____

PRINT: _____



OAKWOOD MANOR HOMEOWNER'S ASSOCIATION OF SARASOTA FLORIDA, INC

3330 Fruitville Road Sarasota, Florida 34237-9022

Name: _____ Lot No. _____

Name: _____

New Resident Orientation Acknowledgment

- The purchaser agrees to use the home as owner's personal residence as per Sections 2.8 and 2.9 of the Association's By-Laws. Rental of any unit must not be less than 3 months, and no more than 6 months per calendar year.

Resident(s) Initials

- I have received and completed the Voter Certificate.

- I have received and completed the Age Verification. One "Occupant" must be fifty-five (55) years of age or older, the second occupant must be forty-five (45) years of age or older, except for "guests" and "bona fide caregivers" as those terms are defined in the Restrictions.

- I have reviewed Oakwood Manor By-laws. I understand that Oakwood Manor Homeowners Association is a cooperative, which is owned and run jointly by its members, who share the profits or benefits.

- I have received Oakwood Manor Rules and Regulations. Oakwood Manor is a pet free community. No animals, reptiles or mammals permitted on the premises. Only two (2) people may live in a home. Each guest visit is limited to thirty (30) days, maximum per calendar year. Motorcycles are NOT permitted in the park at any time.

- I have completed the Emergency Contact Form.

Resident Signature:

Resident Signature:



Lot No. _____

Oakwood Manor Homeowner's Association of Sarasota, FL, Inc.

Acknowledgement of the Rules and Regulations

1. Have you read the Rules & Regulations and By-Laws? Initial Yes _____ No _____
2. The purchaser agrees to use the home as their personal residence as per Sections 2.8 and 29 of the Association By-Laws.
3. Only two (2) people may live in a home.
4. Visiting Guests are limited to thirty (30) days, maximum per calendar year.
5. No animals, reptiles or mammals permitted on the premises.
6. No motorized vehicles except cars and trucks. No motorcycles or motor scooters.
7. Overnight parking of commercial vehicles inside the park is not permitted unless authorized by the manager.
8. Overnight parking on the streets not permitted and vehicles will be towed.
9. Utility trailers are allowed for moving purposes. Must have written permission of the Manager.
10. Boats or boat trailers are not allowed in the Park and will be towed.
11. Motor Homes & Travel Trailers must register at the office and park in the assigned parking space or be towed.
12. Vehicles parked over 24 hours in the parking area without a displayed permit will be towed.
13. Vehicles unauthorized or with expired permits will be towed at the owner's expense.
14. Parking on the grass or on lawns is not permitted; inform your guests.
15. The carport may be used only for vehicles, gas grills and outdoor furniture per documents.
16. Clotheslines are located behind the Maintenance Building for your use.
17. Bushes, shrubbery and plants must be trimmed. This includes Pigmy Palms.
18. Sprinkler systems and/or soaker hoses are not permitted.
19. All residents and guests must wear street clothes or be covered going to or from the pool area.
20. Everyone must shower in the Club House shower rooms or at the pool shower before using the pool or jacuzzi.
21. No bare feet or swimwear, wet or dry, are permitted in the clubhouse.
22. Food, drinks or alcoholic beverages are not permitted in the pool area. (Except plastic water bottles).
23. Persons under the age of 14 must be accompanied by a resident to use any of the Park facilities
24. No one under the age of 18 is permitted to use or be in the jacuzzi or sauna.
25. Non-potty-trained children or incontinent persons must wear waterproof swimwear.
26. Residents are responsible for their guests, advise them of the rules.
27. Modifications to the outside of your home, including landscaping, must be approved in writing by the Manager.
28. No person or persons may own more than one Unit.
29. The Park, at owner's expense, may maintain home sites not maintained to the satisfaction of Management.
30. The Rules and Regulations and By-laws are subject to change by the Board of Directors.
31. This document does not replace or alter any of the present or amended documents of this Association. I/we have read and agree to abide by the Documents and Rules and Regulations of this Association as amended.

This, the _____ day of _____ 20____

Buyer: _____

Buyer: _____

OAKWOOD MANOR HOMEOWNER'S
ASSOCIATION VERIFICATION OF OCCUPANCY

In compliance with the Department of Housing and Urban Development requirements,
we affirm that: (Complete and sign either Part A or Part B)

PART A-HOUSEHOLDS WITH AT LEAST ONE OCCUPANT AGED 55 OR OLDER

- I, _____ the undersigned do hereby certify that I am 55 years of age or older and reside at: _____
- _____ Lot# _____
- Furthermore, I hereby am attaching a copy of a driver's license, birth certificate, passport, immigration card, military identification, or other state, local, national or international official documents containing a birth date of comparable reliability and to certify my birthday is: _____

SIGNATURE OF 55+ UNIT SHAREHOLDER OR NON-SHAREHOLDER

DATE

- I am hereby attaching a copy of one of the documents described above for each other person(s) residing in this unit on a permanent basis, whose name(s) is/are: _____

Name _____	Age _____	Date of Birth _____	Relationship _____
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Name _____	Age _____	Date of Birth _____	Relationship _____
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PART B -HOUSEHOLDS WITH NO OCCUPANT AGED 55 OR OLDER

I, _____ the undersigned do hereby certify that no person residing at _____ Lot# _____ is 55 years of age or older.
The following underage persons who reside in the above unit are:

Name _____	Age _____	Date of Birth _____	Relationship _____
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Name _____	Age _____	Date of Birth _____	Relationship _____
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**OAKWOOD MANOR HOMEOWNERS ASSOCIATION OF SARASOTA,
FLORIDA, INC.
A Corporation Not-for-profit
VOTING CERTIFICATE**

KNOWN ALL PERSONS BY THESES PRESENTS, that the undersigned, is the record owner of that certain Cooperative unit in Oakwood Manor Homeowners Association of Sarasota, Florida, a Cooperative, shown below, and hereby, constitutes, appoints, and designates:

Print Name

Lot #

as their voting representative for the cooperative unit is owned by said undersigned pursuant to the Bylaws of the Association.

The aforementioned voting representative is hereby authorized and empowered to act in the capacity herein set forth until each time as the undersigned otherwise modifies or revokes the authority to set forth in this voting certificate.

On this day & month _____ of 20_____

Please select the category below which describes your form of ownership and sign the appropriate places:

.....
a. We are all the natural persons who are owners of the above-described unit:

Owner Signature

Owner Signature

.....
**b. We are the President or Vice President and Secretary or Assistant Secretary (or Equivalent) of the Corporation or Limited Liability Company
named _____ which owns the above described unit:**

President/Vice President Signature

Secretary/Assistant Signature

.....
**c. I am a General Partner of the General or Limited Partnership named
_____ which owns the above unit.**

General Partner Signature

.....
**d. I am the Trustee of the Trust named _____ which owns the above
described unit. _____**

Trustee Signature

Signature Verification

Lot No. _____

DL ON FILE

Please complete below:

Color Copy of Driver's License

X

(Signature)

PRINT NAME

X

(Signature)

PRINT NAME

As required by Florida State Statute

OAKWOOD MANOR NAME TAGS

PLEASE INDICATE BELOW THE WAY YOU WISH YOUR
NAME TO APPEAR ON YOUR NAME TAG

Hurricane Preparedness Questionnaire Oakwood Manor

2025

Season June 1st - November 30th

Owner Name: _____

Address: _____

Lot No. _____

Telephone: _____

Telephone: _____

Residents: Full Year _____ Part Time _____ Period Away: _____

Full Time Resident

If evacuation is necessary, do you have an evacuation plan? If so please list where you will be going during an evacuation:

You must be able to secure your own home: (Shutters, Electric, Water, Loose Items)

If you are not able to secure your own home, whom have you arranged to assist you?

Name: _____ Phone: _____

Part Time Resident

All part time residents are required to have a caretaker who will be responsible for securing your home: (Shutters, Electric, Water, Loose Items)?

Name: _____ Phone: _____

Oakwood Manor Clubhouse is not a hurricane shelter and cannot be used as a shelter during times of mandatory evacuation and will be locked. Please visit Sarasota County's Emergency Services to get further information on local shelters, and transportation if Medically Eligible. Oakwood Manor is in Evacuation Area Level A. If evacuations are mandatory we are the first to be evacuated. During an active storm the office will be closed, gates will be in the up position; police, ambulance and fire may not be able to come. It's not a matter of if, but when and how large, please prepare today!



EMERGENCY CONTACTS

Oakwood Manor Resident

Name _____
Lot No _____
Park Add _____

Emergency Contact #1

Name: _____
Relationship _____
Phone _____ Alt Phone _____
Email _____

Emergency Contact #2

Name: _____
Relationship _____
Phone _____ Alt Phone _____
Email _____

Emergency Contact #3

Name: _____
Relationship _____
Phone _____ Alt Phone _____
Email _____

Mailing Address Form

LOT # _____

DATE _____

OAKWOOD MANOR HOMEOWNERS ASSOC, INC

NAME: _____

MAILING ADDRESS: _____

OWNER SIGNATURE _____

IF YOU WISH TO CHANGE YOUR MAILING ADDRESS A NEW FORM IS **REQUIRED!**

AUTOMATIC DEBIT SERVICE**CENTENNIAL BANK****Complete Lockbox Association Services System****SIGN UP FOR THE AUTOMATIC DEBIT SERVICE FOR YOUR ASSOCIATION ASSESSMENT FEES
IT'S EASY AND CONVENIENT**

- Your U.S. bank checking or savings account will be debited for your assessment fees based on the day you select and the payment frequency determined by your association. If the debit day you select is on a weekend or federal holiday, your payment will be debited the following business day. Your bank statement will reflect "Assoc Pymt" when a debit has been processed to your account.
- Centennial Bank requires 5 days to setup your enrollment. If your enrollment form is received after the debit day and month you select, your account will be debited on the debit day of the next scheduled payment.
- If you have multiple assessments for your association, you must complete a separate enrollment form for each payment you wish to have automatically debited.
- Simply mail the completed Automatic Debit Enrollment form and a voided check to:
CENTENNIAL BANK
PO BOX 30061
TAMPA, FL 33630-3061
- Centennial Bank will notify you in writing of your first debit date. Please continue to make your payment until you are notified.
- If you wish to change your bank account information or cancel your automatic debit, you must notify Centennial Bank in writing at least 5 days prior to the next debit. You may submit your requests in writing to the PO box shown above.

IMPORTANT REMINDERS

If you are using an electronic means to make your association payment and sell your unit, please be sure you cancel your electronic payment to prevent future debits to your bank account.

All questions regarding your association or payments should be directed to your management company or association.

<<<<<<<< CUT OR TEAR HERE >>>>>>>>>

>>>>>>>> CUT OR TEAR HERE <<<<<<<<

CENTENNIAL BANK AUTOMATIC DEBIT ENROLLMENT

Association Name:			
Unit ID:		Payment Type: <input type="checkbox"/> Maint <input type="checkbox"/> Spec Assmt <input type="checkbox"/> Other	
Name:		Phone:	
Address:			
City:		State:	Zip:
Bank Name:		City:	State:
<input type="checkbox"/> Checking <input type="checkbox"/> Savings	Bank RTG #:	Bank Account #:	
Start Month:	Debit Day (Check One): <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th <input type="checkbox"/> 5th <input checked="" type="checkbox"/> 6th <input type="checkbox"/> 7th <input type="checkbox"/> 8th <input type="checkbox"/> 9th <input type="checkbox"/> 10th		

I hereby authorize Centennial Bank to initiate debit entries to my checking or savings account from the U.S. bank listed above for my association payments. By signing this document, I acknowledge the following: The debit will occur based on the payment frequency provided by the association or management company and on the day indicated above. If the debit day falls on a weekend or federal holiday, my payment will be debited the following business day. If this occurs, my payment could be considered late and the association may assess a late fee. If I wish to cancel my automatic debit or change my bank account information, I must notify Centennial Bank in writing at least 5 days prior to the next debit. The management company or association is authorized to change amounts, change account information, or cancel this debit.

Signature:

Date:

For Bank Use Only:

Assoc UID:

DocPAN:



OAKWOOD MANOR HOMEOWNERS ASSOCIATION OF SARASOTA, FLORIDA, INC.

3330 Fruitville Road, Sarasota, FL 34237

Written Consent to Receive Notices and other Documents via Electronic Transmission

The undersigned are all the shareholders of a Cooperative Unit in **Oakwood Manor Homeowners Cooperative** operated by **OAKWOOD MANOR HOMEOWNERS ASSOCIATION OF SARASOTA, FLORIDA, INC.**, a Florida Not For Profit Corporation (herein, "Association") and agree as follows:

WRITTEN CONSENT TO RECEIVE ELECTRONIC NOTICE: Except as provided below, I hereby provide written consent to the Association and its agents to provide notice of Board of Directors, membership, and committee meetings requiring notice under the Cooperative Act, and other such notices as allowed by Florida Statutes or the cooperative documents, to me by electronic transmission in place of other forms of notice, consistent with the requirements of Chapter 719, Florida Statutes, at the email address or facsimile number provided below. However, electronic transmission shall not be used as a method of giving notice of a meeting for the recall and removal of a director. I understand that notwithstanding this consent, the Association may elect to deliver one or more notices to me by mail or hand delivery (rather than electronically) as the Association determines necessary, and such mail or delivery shall constitute full compliance with the requirements of the Cooperative Act and the Association's cooperative documents.

INVOICE FOR ASSESSMENT OR STATEMENT OF ACCOUNT: **THIS WRITTEN CONSENT TO RECEIVE NOTICES AND OTHER DOCUMENTS VIA ELECTRONIC TRANSMISSION DOES NOT APPLY TO INVOICES FOR ASSESSMENTS OR STATEMENTS OF ACCOUNT.**

OFFICIAL RECORDS: Section 719.104(2)(a)5., Florida Statutes provides as follows: *"The association shall also maintain the e-mail addresses and the numbers designated by unit owners for receiving notice sent by electronic transmission of those unit owners consenting to receiving notice by electronic transmission. The e-mail addresses and numbers provided by unit owners to receive notice by electronic transmission shall be removed from association records when consent to receive notice by electronic transmission is revoked. However, the association is not liable for an inadvertent disclosure of the e-mail address or number for receiving electronic transmission of notices."*

SPAM/JUNK FILTERS: REVOCATION: I understand that it is my responsibility to remove or bypass any spam or junk mail filters that may block receipt of mass emails sent to owners by the Association or its agents. I may revoke this consent at any time by notifying the Association in writing. Revocation of consent is effective forty-eight (48) hours after receipt by the Association.

EMAIL ADDRESS OR FACSIMILE NUMBER: _____. If this information should change, Shareholder(s) agrees to immediately provide the Association with the new email or fax number.

Date: _____

Shareholder's Signature: _____ Shareholder's Signature: _____

Print Name: _____ Print Name: _____

Cooperative Unit Address: _____

Telephone Number(s): _____

Email Address

Email Address



Print legibly or type all information. Account and telephone numbers and complete addresses are required.

APPLICATION FOR OCCUPANCY/APPROVAL

PRINT OR TYPE (Use Black Ink) Purchase _____ or Lease _____ (Check One) Desired Move In Date: _____

Apt. No. _____ Address: _____

Name (Mr./Mrs./Ms.) _____ Date of Birth _____ Soc. Sec No. _____
(mm/dd/yy) (Passport, Alien, Green Card, Social Insurance No.)

Spouse (Mr./Mrs./Ms.) _____ Date of Birth _____ Soc. Sec No. _____
(mm/dd/yy) (Passport, Alien, Green Card, Social Insurance No.)

Applicant Contact # _____ Spouse # _____

Number of people who will occupy. Adults (over age 18) _____ Children (over 18) _____ Children (under 18) _____

Names & ages of children who will occupy: _____

Description of Pets (Breed, Size, Color, Weight, Etc.) _____

In case of emergency notify: _____

Name Address Telephone

PRINT OR TYPE (Use Black Ink) RESIDENCE HISTORY

A. Present Address _____
(Street Address, Apt No., City, State, Zip)

Name of Apt. /Condo _____ Dates of Residency _____

Name of Landlord: _____ Phone _____

Monthly Rent Amount:\$ _____

PRINT OR TYPE (Use Black Ink) EMPLOYMENT & BANK REFERENCES

A. Employed By (Business Name) _____ Phone _____
(or retired from)
How long _____ Dept. or Position _____ Mo. Income _____

Supervisor/Manager Name: _____

B. Spouse's Employment (Business Name) _____ Phone _____
(or retired from)
How long _____ Dept. or Position _____ Mo. Income _____

Supervisor/Manager Name: _____

C. Bank Reference _____ Phone _____
How long _____ Ch. Acct. No. _____ Sav. Acct. No. _____

Address _____ Zip _____

CHARACTER REFERENCES & VEHICLE INFORMATION

1. Name _____ Address _____ Phone (Residential & Office) _____

2. Name _____ Address _____ Phone (Residential & Office) _____

Driver's Lic. No. #1 _____ #2 _____ State _____

Make _____ Model _____ Year _____ Plate No. _____ Color _____ State _____

Make _____ Model _____ Year _____ Plate No. _____ Color _____ State _____

Have you or the co-applicant ever file for bankruptcy, evicted from any tenancy, ever broken lease? If YES

Explain: _____

Have you or the co-applicant been arrested or convicted of any crime. Including Misdemeanors, DUI, etc or any criminal charge pending?

If Yes Explain: _____

If this application is NOT legible or is not completely and accurately filled out, Verify Screening Solutions (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, Verify Screening Solutions may investigate the information supplied by the applicant and a full disclosure of pertinent facts may be made to the Association. The investigation may be made of the applicant's character, general reputation, personal characteristics, credit standing, criminal background and mode of living as applicable. Any misrepresentation, falsification or omission of information may result in your disqualification. If any question is not answered or left blank, this application may be returned, not processed or not approved. Missing information will cause delays in processing your application.

Signature _____ Signature _____

Applicant Date Applicant's Spouse Date

OAKWOOD MANOR HOMEOWNERS ASSOCIATION OF SARASOTA, FLORIDA, INC.

3330 Fruitville Road, Sarasota, FL 34237

(941) 366-2880 Telephone Bill@oakwoodmanorassoc.com

Authorization and Consent to Disclosure of Information in the Shareholder Directory

Section 719.104(2)(c)5., Florida Statutes provides that certain shareholder information is not accessible to other shareholders and third parties, except for the shareholder's name and Oakwood Manor unit address. However, Florida law permits a shareholder to consent in writing to the disclosure of certain additional information, such as your email address and telephone number(s), in the directory. Your name and Oakwood Manor unit address will be automatically included in the Association's Shareholder Directory.

The purpose of this form is to provide you the opportunity to consent to the inclusion of additional information in the Shareholder Directory.

By signing this form and checking the appropriate boxes below, you agree to release, hold harmless, and assert no claim against **OAKWOOD MANOR HOMEOWNERS ASSOCIATION OF SARASOTA, FLORIDA, INC.**, its officers, directors, managers, agents, and employees in connection with the Association's release and/or publication of the below approved information in the Association's Shareholder Directory. This authorization and consent will remain effective until revoked by you in writing.

Owner's Name(s) as you desire them to appear:

#1 _____ #2 _____

Address: _____

Check Box(es)

☐ Email Address # 1 _____

☐ Email Address # 2 _____

☐ Cell Phone # 1 _____

☐ Cell Phone # 2 _____

☐ Local Landline (941) _____

All Shareholders must sign below:

#1 Sign _____ Print _____

#2 Sign _____ Print _____

You may drop off your completed form at the office, mail or email it to the Association at the above address. If this form has not been returned within 30 days, only your legal name(s) and Oakwood Manor unit address will be published in the Shareholder Directory. Thank you in advance for your cooperation.

RESIDENT VEHICLE INFORMATION

DATE: _____ LOT # _____

RESIDENT NAME: _____

Address #: _____

PHONE#: _____

Vehicle #1

VEHICLE LICENSE NO: _____ STATE: _____

VEHICLE YEAR AND MAKE: _____

Gate sticker # (issued in office) _____

Vehicle #2

VEHICLE LICENSE NO: _____ STATE: _____

VEHICLE YEAR AND MAKE: _____

Gate sticker # (issued in office) _____

Gate stickers are placed in the inside windshield by Oakwood Manor staff during office hours. If you are an applicant, this will be issued after closing.

**Rental vehicles must use the monthly access code to get in.
Membership Certificate **required** for a Gate Sticker.**

OAKWOOD MANOR HOMEOWNERS ASSOC.

**GOLF CARTS
PROOF OF INSURANCE FORM**



NAME: _____

ADDRESS: _____

LOT #: _____ DATE: _____

STICKER #: _____

NAME OF INSURANCE COMPANY: _____

NEED TO MAKE COPY OF PROOF OF INSURANCE ON GOLF CART.

DATE OF INSURANCE COVERAGE:

AMOUNT OF INSURANCE COVERAGE:

GOLF CART MODEL: _____

YEAR OF CART: _____



**OAKWOOD MANOR HOMEOWNER'S
ASSOCIATION OF SARASOTA FLORIDA, INC**
3330 Fruitville Road Sarasota, Florida 34237-9022
Phone: (941) 366-2880 Fax: (941) 954-5661
Email: bill@oakwoodmanorassoc.com

Home Buyers and Closing Agents,

The transfer of the land share/Membership Certificate must go through the Oakwood Manor official record keeper attorney, Harlan Domber, esq. The land share is one of the key components of real property and ownership at the Park. There will be a fee to Harlan Domber to provide the documents to Sarasota County for recording. If this is not done the new owners will not have any rights in the association and will have a clouded title going forward.

If you are using Harlan Domber as your closing agent, please disregard this form.

Harlan R. Domber, Esquire
Law Office of Harlan R. Domber, P.A.
3900 Clark Road, Suite L-1
Sarasota, FL 34233
(941) 923-9930/(800) 804-9930
Fax: (941) 923-3400
E-mail: hdomber@aol.com

Kind regards,

Bill Walsh CMCA, AMS
Property Manager
Oakwood Manor HOA
(941) 366-2880

PLEASE SIGN FOR RECEIPT

BUYER

BUYER

BUYER'S AGENT



Oakwood Manor Co-op

Welcome to Enumerate Engage, a mobile app and website for your community!

Go to: **engage.goenumerate.com/s/oakwoodmanorcoop/**

If you haven't received a welcome email, use the "Register" button, and follow the instructions. If you are a new resident to the community, it may take a few days for the management company to confirm your residency. An email notification with login instructions will be sent to you once you are authorized.

Get the App!

- Text **engage** to **59248** and receive a text back with an app download link.
- Or search for **Enumerate Engage** in the Google Play Store.

To stop receiving all text messages, reply STOP to the text message you received. Reply SUPPORT if you need technical support. Message & data rates may apply. Message frequency will vary.

Privacy Policy: <https://engage.goenumerate.com/privacypolicy.php>

Terms of Use: <https://engage.goenumerate.com/termsfuse.php>

Technical support: engagesupport@goenumerate.com