

Lily's Cay at Vero Beach Homeowners Association
C/O Elliott Merrill Community Management

RESALE APPLICATION

Please allow up to fifteen (15) days for processing. **THE APPLICATION REQUIRES APPROVAL BY THE BOARD OF DIRECTORS.** A copy of the sales agreement must be attached to this application along with a copy of each individual's photo ID is also required to be submitted with this application.

I/We, the undersigned, furnish the following information for the use of the Association and authorize them to contact any and/or all references; I/we also declare that the following information is true and correct. I/We agree that the Lily's Cay at Vero Beach Homeowners Association Inc. may terminate any agreement entered into if any of the information is misstated or misrepresented.

Date: _____ Address: _____
(LILY'S CAY PROPERTY)

Information:

CLOSING DATE: _____

Applicant Name: _____

Applicant Contact Phone Number: _____ Email: _____

Co-Applicant Name: _____

Co-Applicant Phone Number: _____ Email: _____

Present Address: _____

Occupant(s) who may be in residence (other than applicants):

1) Name: _____ Age: _____ Relationship: _____

2) Name: _____ Age: _____ Relationship: _____

Applicant Employer: _____ Phone #: _____

Title: _____ Number of years: _____ Supervisor: _____

Co-Applicant Employer: _____ Phone #: _____

Title: _____ Number of years: _____ Supervisor: _____

Lily's Cay at Vero Beach Homeowners Association
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PET INFORMATION:

Pet Name: _____ Type & Breed: _____ Color: _____ Weight: _____

Pet Name: _____ Type & Breed: _____ Color: _____ Weight: _____

VEHICLE INFORMATION:

Vehicle # 1:

Make: _____ Model: _____ Year: _____

Color: _____ Vehicle Tag #: _____ State: _____

Vehicle # 2:

Make: _____ Model: _____ Year: _____

Color: _____ Vehicle Tag #: _____ State: _____

Vehicle # 3:

Make: _____ Model: _____ Year: _____

Color: _____ Vehicle Tag #: _____ State: _____

ACKNOWLEDGEMENT OF DEED RESTRICTIONS:

I/We understand that I/We are moving into a deed-restricted community. I/We hereby agree to abide to all Documents and Rules and Regulations of the Lily's Cay at Vero Beach Homeowners Association, Inc.

I/We have received the Declaration of Covenants, Conditions And Restrictions of the Association and agree to abide by them.

Buyer: _____
Signature & Date

Buyer: _____
Signature & Date

PLEASE SUBMIT COMPLETED APPLICATION TO:
Lily's Cay at Vero Beach HOA
C/O Elliott Merrill Community Management
835 20th Place, Vero Beach, FL 32960

Dear Lily's Cay Owners:

In an effort to obtain and maintain the most accurate contact information, we ask that you please fill in the below blanks and return this form to us by either mail or fax or by email (Paolaa@elliottmerrill.com). It is extremely important that the Association be able to contact you in the event of an emergency, and having this information is very beneficial to keeping you informed and up-to-date on happenings in the community.

Furthermore, *in accordance with Florida Statute, if you wish to have any of your contact information printed in the Association's Directory, you will need to indicate so by checking the box beside those items that you wish to have shared with your neighbors.*

If you do not wish to have any of your contact information printed in the Association's Directory, please check here.

PLEASE PRINT CLEARLY

Owner Name(s) _____

Your Lily's Cay address: _____ Vero Beach, FL 32967

Local Telephone #: (772) _____ - _____ Cell Phone #: _____ - _____ - _____

Other #: _____ - _____ - _____

Email Address(es): _____

Mailing Address (if different than above): _____

Owner(s) Signature(s)

_____/_____/_____
Date

Consent to Use Electronic Transmission for The Lily's Cay Communications

I, _____, permit Lily's Cay to use electronic transmission to send
Owner Name-Please Print
required and permitted notices and communications to me using the e-mail address provided below. I agree to promptly inform the Association whenever my e-mail address changes and understand that I cannot receive electronic transmission of notices, unless I provide a valid e-mail address.

PLEASE PRINT CLEARLY

Email Address(s): _____

My Lily's Cay Address: _____ Lot #: _____

Signature: _____ Date: _____

Please return this form, upon completion, to:

Elliott Merrill Community Management
Attn: Paola Alvarado
835 20th Place
Vero Beach, FL 32960

Or via email at Paolaa@elliottmerrill.com

Or via fax to 772-569-4300

Telephone entry enrollment / change form.
Email to: paolaa@elliottmerrill.com
Fax to: 772-569-4300
Mail to: 835 20th Place, Vero Beach FL 32960

Lily's Cay

Resident name

Property Address

Requested display name (how outsiders will view name on unit) i.e. B. Smith, do not use first names. This is a security issue.

Resident phone number (local preferred. Cell phone numbers as well may not work in all cases)

Desired 4-digit Code

Contractors' 4-digit Code

We will fill out this line for the remotes. (Installer's use only)

Signature of authorized HOA representative and title