

**Provence Bay HOA, Inc.**  
*c/o Elliott Merrill Community Management*  
835 20<sup>th</sup> Place, Vero Beach FL 32960  
Phone (772) 569-9853 / Fax (772) 569-4300  
[www.ElliottMerrill.com](http://www.ElliottMerrill.com)

Greetings Prospective Buyer:

Our office is responsible for managing the association above. Upon closing, we are also responsible for the collection of maintenance assessments, which are due on the 1st day of each quarter (January, April, July and October). Once you close, our office will send you a **statement with payment options**.

Your management team is Matt Hope – Manager; Stephanie Revelle - Administrative Assistant; Robert Joseph– Accounts Receivable. Please contact us with any questions or concerns.

The attached application for occupancy must be completed by the purchaser(s). **A copy of the signed sales contract must accompany this application.**

**There is a \$200.00 non-refundable fee required with the application made payable to the Provence Bay Homeowners Association, Inc. also a non-refundable check for \$25.00 made out to Elliott Merrill Community Mgmt.**

Please complete the **Application for Purchase, the Consent to Receive Electronic Correspondence, and the Voter's Certificate** included in this package and return to our office. We would appreciate you keeping us informed when you change your address or phone number. This is especially important for our seasonal residents, so that correspondence may reach you in a timely manner.

We look forward to meeting you!

Sincerely,  
Stephanie Revelle, Adm. Asst.  
Elliott Merrill Community Management

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**APPLICATION FOR PURCHASE**

DATE: \_\_\_\_\_ CLOSING DATE: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

APPLICANT NAME(S): \_\_\_\_\_ PHONE #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

CO-APPLICANT NAME(S): \_\_\_\_\_ PHONE #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

IN ADDITION TO APPLICANT(S), LIST OTHERS WHO WILL RESIDE IN UNIT

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

**EXPECTED OCCUPANCY:** Please Circle One: FULL TIME SEASONAL RENTAL

**RENTAL OR SEASONAL ONLY:** Please list your second mailing address for POA notices & assessment invoices:

\_\_\_\_\_

**CONTACT IN CASE OF EMERGENCY:**

NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

**PETS:** WILL PETS RESIDE IN UNIT? NO \_\_\_\_\_ YES \_\_\_\_\_ IF YES, LIST # \_\_\_\_\_ (Limit 3)

BREED AND WEIGHT \_\_\_\_\_

BREED AND WEIGHT \_\_\_\_\_

BREED AND WEIGHT \_\_\_\_\_

**\*\*\*\*\*Please include picture and current vet records \*\*\*\*\***

**VEHICLE(S) INFORMATION:** I UNDERSTAND CARS MUST BE PARKED IN THE GARAGE OR DRIVEWAY NOT ON STREET OR SIDEWALKS \_\_\_\_\_ (Initials)

**1<sup>st</sup> Vehicle Make** \_\_\_\_\_ **Model** \_\_\_\_\_ **Year** \_\_\_\_\_

**Color** \_\_\_\_\_ **License Plate State & Number** \_\_\_\_\_

**2<sup>nd</sup> Vehicle Make** \_\_\_\_\_ **Model** \_\_\_\_\_ **Year** \_\_\_\_\_

**Color** \_\_\_\_\_ **License Plate State & Number** \_\_\_\_\_

**3<sup>rd</sup> Vehicle Make** \_\_\_\_\_ **Model** \_\_\_\_\_ **Year** \_\_\_\_\_

**Color** \_\_\_\_\_ **License Plate State & Number** \_\_\_\_\_

**ACKNOWLEDGEMENT**

I/We hereby agree on behalf of all persons who may use the unit, which I seek to purchase or lease that I/we have read, understand and will abide by all Restrictions in the By-Laws, Rules and Regulations and Association Declaration of Covenants, Conditions, and Restrictions For Provence Bay thereof, recorded in Official Records Book 2120 PG 619 Public Records of Indian River County, Florida, and any amendments hereto.

I/We understand that failure to follow the Rules and Regulations will subject us to violation notices, fines, etc. I/We understand that the acceptance for purchase or lease is conditioned upon the truth and accuracy of this application and upon the approval of the Board. I give my full authorization to verify the above information.

Owner acknowledges that the Declaration restricts leases to a minimum of a six (6) month lease term and only one lease in any 12 month period is allowed. Further, Owner acknowledges and agrees that leasing of a Lot is restricted to only one lease of a single Lot and no Owner or group of Owners who are Affiliates shall, on their own or through an agent, lease more than one Lot at the same time.

*APPLICANT SIGNATURE* \_\_\_\_\_ *DATE* \_\_\_\_\_

*CO-APPLICANT SIGNATURE* \_\_\_\_\_ *DATE* \_\_\_\_\_

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**CONSENT TO RECEIVE ELECTRONIC COMMUNICATIONS**

**Note:** The completion and return of this form will authorize **Provence Bay HOA, Inc. (the “Association”)** and its community management company, **Elliott Merrill Community Management (the “Manager”)** to use the E-mail address designated below for the delivery of Association-related communications and documents.

Examples of communications and documents sent via email include but not be limited to:

- Notice of upcoming meetings (Board, Members, Budget, and Assessment)
- Association meeting minutes
- Association notices of maintenance issues affecting entire community
- Association notice of outside issues that have an impact on our community  
(e.g. nearby road closures, local construction impact, relevant governmental issues)
- ACC notifications (e.g. roof cleaning, painting, power washing...)
- Association election reminders
- Request for owner input on various subjects
- Reserve Funding Study
- Committee minutes

I/We, \_\_\_\_\_ permit Provence Bay HOA to  
Owner(s) Name-Please Print

use electronic transmission to send 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):** \_\_\_\_\_  
\_\_\_\_\_

**Provence Bay Address:** \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# *Provence Bay Homeowners Association, Inc.*

## **VOTING CERTIFICATE**

TO: The Provence Bay Board of Directors

**THIS IS TO CERTIFY** that the undersigned, constituting all of the record owners of

Address \_\_\_\_\_ in the Provence Bay HOA.

Have designate \_\_\_\_\_

**(ONLY 1 Owner can be the voting representative, choose which Owner)**

as their representative to cast all votes and to express all approvals that such owners may be entitled to cast or express at all meetings of the membership of the Association and for all other purposes provided by the Declaration, Articles and Bylaws of the Association.

The following examples illustrate the proper use of this Certificate:

1. Unit owned by Bill and Mary Rose, husband and wife. Voting Certificate ***required*** designating either Bill or Mary as the voting representative. NOT A THIRD PERSON.
2. Unit owned by John Doe and his brother, Jim Doe. Voting Certificate ***required*** designating either John or Jim as the Voting Representative. NOT A THIRD PERSON.
3. Unit owned by Overseas, Inc., a corporation. Voting Certificate ***required*** designating person entitled to vote signed by the President or Vice President of Corporation and attested by Secretary or Assistant Secretary of Corporation.
4. Unit owned by John Jones. No Voting Certificate required.

This Certificate is made pursuant to the Declaration and the Bylaws and shall revoke all prior Certificates and be valid until revoked by a subsequent Certificate.

DATED the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
UNIT OWNER NAME

\_\_\_\_\_  
UNIT OWNER SIGNATURE

\_\_\_\_\_  
UNIT OWNER NAME

\_\_\_\_\_  
UNIT OWNER SIGNATURE