

WINDJAMMER VILLAGE of NAPLES, INC.

APPLICATION TO PURCHASE

1. Windjammer Village of Naples, Inc. is a **55 and older community** and a **photo ID** is required at time of application
2. No application will be processed unless fully and properly completed with appropriate check or checks. The application must be submitted at **least 20 days before** occupancy.
3. A non-refundable \$100.00 application fee, made payable to Windjammer Village of Naples, Inc. **must** accompany your application.
4. A fully executed copy of the SALES CONTRACT must be enclosed with this application.
5. The Windjammer Board of Directors requires an interview with the Sales and Rental Committee. You will be contacted by a member of the Sales & Rental Committee to schedule your interview.
6. I/We understand a maximum of no more than **two (2) pets** per household are permitted. (R&R 5.0)
Guests visiting with pet(s) count toward the two (2) pet limit.

_____/_____
Initial/date Initial/date
7. I/We understand a criminal background check will be required for all purchasers.

_____/_____
Initial/date Initial/date
8. I/We understand that a guest for more than thirty (30) days per calendar year requires that the guest request prior BOD approval and then submit an application, including criminal background check, and application fee to reside on the property for up to ninety (90) days (R&R 1.2 C&D)

_____/_____
Initial/date Initial/date
9. I/We understand that all modifications and/or additions to Unit including but not limited to exterior painting, driveways, storage sheds etc. require prior approval of Paint and Home Improvement Committee/BOD. (R&R 2.6 & 2.7)

_____/_____
Initial/date Initial/date

Please sign here that you have read the Windjammer Rules and Regulations (Revised & Adopted 2019) and agree to abide by these and other rules and regulations as set forth in the documents.

Initial/date Initial/date

Date

Submit the above forms, documents and application fee to:

**WINDJAMMER VILLAGE OF NAPLES, INC.
C/o RESORT MANAGEMENT
2685 HORSESHOE DR S, #215
NAPLES, FL 34104**

PHONE 239-649-5526 FAX 239-403-1061

WINDJAMMER VILLAGE, INC.

C/o RESORT MANAGEMENT

2685 HORSESHOE DR S, #215

NAPLES, FL 34104

PHONE 239-649-5526 FAX 239-403-1061

APPLICATION FOR APPROVAL TO PURCHASE 55 AND OLDER COMMUNITY PHOTO ID IS REQUIRED

Street address _____

Owned by: _____ A copy of the sales contract must accompany this application.

Closing Date: _____

() I/We apply for approval to purchase the Unit listed above.

() I/We represent that the following information is complete and true, and agree that any misrepresentation in this application will justify automatic rejection. I/We consent to additional inquiry concerning this application, and if requested will agree to an appearance before the Board of Directors for further questioning.

() I/We are aware that a criminal background check will be done on each adult occupant and I/We give approval.

Applicant's Name _____ D.O.B. _____

Spouse's Name _____ D.O.B. _____

Present Address _____ City _____ State _____ Zip _____

Applicant's telephone # _____ Email _____

Applicant's Driver's License# _____ Spouse's Driver's License _____

U.S. Citizen? _____ Male _____ Female _____

If "no" please submit a copy of residency authorization or passport photo

Business or Profession (even if retired) _____

Make of car (s) _____ Year _____ License# _____ State _____
_____ Year _____ License# _____ State _____

Required Emergency Contact:

Name: _____ Phone# _____
Relationship: _____

Person who has Emergency Access to Property:

Name: _____ Phone# _____

GENERAL CONDCTIONS:

I/We are aware that the units may not be occupied by more than (2) permanent residents.

I/We have read the Rules and Regulations of Windjammer Village, Inc. and agree to comply
therewith if this application for approval to purchase is approved.

_____/_____
Initial/date Initial/date

_____/_____
Initial/date Initial/date

Buyer Date Buyer Date

.....
Office Use only:

Sales & Rental Committee: _____
Interviewer/Date Interviewer/Date

Application Approved: _____
Board of Director /Date

Application is Denied: _____
Board of Director /Date

Return Your Application to:
Resort Management
2685 HORSESHOE DR S, #215, NAPLES, FL 34104

Windjammer Village of Naples, Inc.

Acceptance of Rules and Regulations Form

The purpose of this form is to insure that all shareholders/homeowners and residents have received a copy of and agree to abide by the revised Rules and Regulations adopted by the Board of Directors in 2019.

I/We (name) _____

The Shareholder (s), Homeowner (s), Resident (s)

_____ living at above address in Windjammer Village have received a copy of these revised Rules and Regulations and agree to read and abide by these revised Rules and Regulations.

If the Shareholder or Homeowner or Resident is not in residence at the time these Rules and Regulations are distributed, a copy shall be mailed to them at their most recent known address. The mailing of this document and the certification of the mailing list shall serve as agreement by the Shareholder, Homeowner or Resident.

Signature: _____ Date: _____

Signature: _____ Date: _____

WINDJAMMER VILLAGE of NAPLES, INC.
Census / Contact Information

Name: _____ Date: _____

Permanent Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Home Phone: _____

Windjammer Directory: Do not include my Phone #, Do not include my Email

Windjammer Address: _____

Local Phone #: _____

Windjammer Residence: Seasonal: _____ Year Round: _____

Emergency Contact:

Name: _____ Phone: _____

Relationship: _____

Contact who has key to your property:

Name: _____ Phone: _____

Contact who will maintain landscaping for your property while you are gone:

Name: _____ Phone: _____

This page is for information only. Copy will be maintained by Resort Mgmt and Windjammer Office.

Windjammer Village Naples, Inc.
Pet Form
(NO EXOTIC ANIMALS ARE ALLOWED)

You are allowed a maximum of no more than **two (2)** pets per unit. **(R&R Adopted in 2019)**

☐ I do not have any pets at this time.

Signature

Date

Unit #

☐ I understand that falsification of information or failure to register my pet will result in revocation or the denial of approval by the Windjammer Village Board of Directors.

☐ I further understand that I am fully responsible for the action of my pet and have read the Rules and Regulations regarding the control of my pet.

☐ I understand that this Pet Approval is only for this pet and expires when the pet is no longer on the property.

REQUIRED DOCUMENTATION:

- 1. Please Submit a Colored Photo of your Pet**
- 2. Attach a copy of the pet's current immunization record.**

Owner: _____ Unit # _____

Address: _____

Home Phone Number: _____ Work Phone Number: _____

Type of Pet: _____ Present Weight: _____

Breed: _____ Weight at Maturity: _____

Signature of Pet Owner

Print Name

Entered into Pet dB by:

Date: