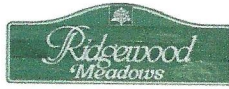


Location:
Ridgewood Meadows Condominium Association, Inc.
A55 and Over Community
77A Spoonbill Lane
Ellenton, FL. 34222-0432



Contact:
Ridgewood Meadows Condominium Association, Inc.
P O Box 118
Ellenton, FL 34222-0432
Phone : 941-729-3587 Email : rmcabod1@gmail.com

INTENT TO PURCHASE UNIT # _____
(TO BE COMPLETED BY BUYER(S))

BUYER(S) NAME AS IT WILL APPEAR ON THE DEED: _____ Date Completed MM/DD/YYYY ____/____/____

1. NAME(S): (PLEASE PRINT) _____
CURRENT ADDRESS Street/City/State/Zip _____ / ____ / ____
PURCHASER(S) AGE(S) _____ (PLEASE INCLUDE COPIES OF ID) Anniversary ____/____/____
PHONE NUMBER(S) CELL _____ CELL _____
EMAIL: _____

2. NAME(S): (PLEASE PRINT) _____
CURRENT ADDRESS Street/City/State/Zip _____ / ____ / ____
PURCHASER(S) AGE(S) _____ (PLEASE INCLUDE COPIES OF ID) Anniversary ____/____/____
PHONE NUMBER(S) CELL _____ CELL _____
EMAIL: _____

NAME /AGE OF ANY OTHER PERSON(S) WHO WILL BE OCCUPYING UNIT _____ /MM/DD/YYYY _____
PHONE NUMBER(S) CELL _____ CELL _____
EMAIL: _____
BUYERS LISTED ABOVE ARE PURCHASING UNIT # _____ Closing DATE ON OR ABOUT: ____/____/____

INTENDED PROPERTY USE:

PRIMARY RESIDENCE Y(Initial) _____ PART TIME RESIDENCE Y(Initial) _____
PURCHASE AS RENTAL OR LEASE PROPERTY (Requires RMCA Board approval) Y(Initial) _____ N(Initial) _____
PURCHASE- RESTORE AND SELL (Requires RMCA Board approval) Y(Initial) _____ N(Initial) _____

EXPECTED OCCUPANCY DATE ____/____/____

I/WE UNDERSTAND THAT A BACKGROUND CHECK WILL BE MADE PRIOR TO A PERSONAL ORIENTATION (WITH RMCA BOARD) AT THE BUYER'S EXPENSE OF \$____ PER PERSON. PAYABLE TO RIDGEWOOD MEADOWS CONDOMINIUM ASSOCIATION, Inc.

PRIOR TO PROCESSING ESTOPPEL, THE ABC DEFICIENCIES MUST BE CORRECTED. ABC INSPECTION(S) MUST BE COMPLETED THROUGH REPAIR(S), REPLACEMENT, TRIMMED, REMOVED, PAINTED OR OTHERWISE COMPLIED PER ABC INSPECTION. **VERIFIED AS COMPLETED**, BY ABC COMMITTEE INSPECTOR. ATTACHED IS CURRENT ABC INSPECTION FORM.

I/WE UNDERSTAND THAT AN ESTOPPEL FEE WILL BE CHARGED BY THE ASSOCIATION IN CONNECTION WITH THE SALE OF THIS UNIT. I HAVE REVIEWED AND UNDERSTAND THE RIDGEWOOD CONDOMINIUM ASSOCIATION RULES AND REGULATIONS AND CONFIRM ALL INFORMATION ENTERED ABOVE IS TRUE AND ACCURATE.

1. BUYER(S) SIGNATURES _____

2. BUYER(S) SIGNATURES _____

RMCA BOD PRINT _____ SIGN _____ DATE ____/____/____

RMCA BOD PRINT _____ SIGN _____ DATE ____/____/____

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 RMCA
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 941.729.3587

**BACKGROUND SCREENING SERVICES, LLC
 TENANT SCREENING APPLICATION**

1361 UNIT # _____

Date M/D/YYYY ____ / ____ / ____

APPLICANT: Please print neatly. Information that is not legible will delay the process of this application.

Full Legal Name _____	Maiden/Alias _____
Current Street Address _____	City _____ State ____ Zip _____
LL Phone _____	Cell Phone _____
Driver's License Number _____	State of ID _____ EXP MM/DD/YYYY ____ / ____ / ____
Social Security Number ____ / ____ / ____	Date of Birth MM/DD/YYYY ____ / ____ / ____
Employer _____	Occupation _____ Salary Annual -\$ _____
Address _____	City _____ State ____ Zip _____
Supervisor _____	phone _____ Dates of Service MM/YY ____ / ____ MM/YY ____ / ____

IF YOU ANSWER YES TO ANY OF THE FOLLOWING QUESTIONS PLEASE EXPLAIN

Have you ever been evicted? Y ____ N ____ Have you filed bankruptcy in the last 7 years? Y ____ N ____

Have been arrested or convicted of a misdemeanor or felony? Y ____ N ____ Date/MM/YY ____ / ____ County _____

CO-APPLICANT:

Full Legal Name _____	Maiden/Alias _____
Current Street Address _____	City _____ State ____ Zip _____
LL Phone _____	Cell Phone _____
Driver's License Number _____	State of ID _____ EXP MM/DD/YYYY ____ / ____ / ____
Social Security Number ____ / ____ / ____	Date of Birth MM/DD/YYYY ____ / ____ / ____
Employer _____	Occupation _____ Salary Annual -\$ _____
Address _____	City _____ State ____ Zip _____
Supervisor _____	hone _____ Dates of Service MM/YY ____ / ____ MM/YY ____ / ____

Have you ever been evicted? Y ____ N ____ Have you filed bankruptcy in the last 7 years? Y ____ N ____

Have been arrested or convicted of a misdemeanor or felony? Y ____ N ____ Date/MM/YY ____ / ____ County _____

CURRENT LANDLORD:

Name _____ Cell Phone _____

Years/months at residence MM/YYY ____ / ____ Current rent (Month) \$ _____ Reason for move _____

PREVIOUS ADDRESS IF LESS THAN 5 YEARS AT ABOVE ADDRESS:

Street Address _____ City _____ State ____ Zip _____

Landlord's Name _____ Cell Phone _____ Reason for move _____

I understand that an investigative background inquiry is to be done, including but not limited to identity and prior address(es) verification, criminal history, credit history, employment verification, reason(s) for termination, work and other references. I understand that for the purpose of this inquiry, various sources will be contacted to provide information, including but not limited to various federal, state, municipal, corporate, and private sources which may maintain records concerning my past activities relating to possible criminal conduct civil court litigation, driving history and credit performance as well as other information. I authorize without reservation, any company, agency, party, or other source contacted to furnish the above information.

Applicant Signature _____ Date MM/DD/YYYY ____ / ____ / ____

Co- Applicant Signature _____ Date MM/DD/YYYY ____ / ____ / ____

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PERSONAL INFORMATION

Date M/D/YYYY ____ / ____ / ____

To be filed by the Ridgewood Meadows Condominium Board with the State of Florida in Accordance with the State of Florida and Federal Adult Community Act

Street Address _____

Occupant # 1 _____ MM/DD/YYYY Birth ____ / ____ / ____

Florida Landline: _____ Cell Phone _____ E-mail _____

Military Y / N Branch _____ Anniversary Date _____

Occupant # 2 _____ MM/DD/YYYY Birth ____ / ____ / ____

Florida Landline: _____ Cell Phone _____ E-mail _____

Military Y / N Branch _____ Anniversary Date _____

PETS WITHIN THE UNIT:

DOG(s) Breed of Dog(s): _____ / _____ WT (s) _____ / WT (s) _____

CAT(s); Indoor cats only. # _____

OUT-OF-PARK ADDRESS (to be filled out by part-time residents)

Owners are responsible for forwarding all mail. **RMCA will remit any correspondence to the Ridgewood address.**

Arrive: Date: MM/DD/YYYY ____ / ____ / ____ Depart: Date: M/DD/YYYY ____ / ____ / ____

Street: _____ City _____ State _____ Zip _____

Out of State Landline: _____ Cell Phone _____ E-mail _____

(Key or Access to Unit) NAME _____ Unit ____ Cell ____ / ____ / ____

AFFIDAVIT INFORMATION

The section below only needs to be filled out when someone living with you is **not registered as a resident with the RMCA Board.**

I _____ have attached a copy of a legally acceptable identification for
(Name) _____ who will be living in our home as a resident. The identification states said guest
is at least 55 years of age or older. I also confirm that no one under 18 years of age lives in my home in Ridgewood Meadows Unit # _____

Date: MM/DD/YYYY ____ / ____ / ____ Signature: _____

Acceptable proof of age includes driver's license, passport, immigration card, military ID card, birth certificate and other government documents that show a date of birth.

MEADOWS VEHICLE/GOLF CART RFID CAR INFORMATION BELOW IS FOR UNIT # _____

Make/Type of Vehicle: _____ Year _____ Color _____ Plate _____ State _____

Make/Type of Vehicle: _____ Year _____ Color _____ Plate _____ State _____

Of Golf Carts: _____ # Of Motorcycles: _____ RV License Plate _____ State _____

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FAIR HOUSING ACT CENSUS – OCCUPANCY CHANGE FORM

Date M/D/YYYY _____ / _____ / _____

(This is the form used when occupancy of a unit changes through sale or lease.)

Age discrimination in housing is generally prohibited; however, the Fair Housing Act of 1988 and the Housing for Older Persons Act of 1995 (109 Stat. 787) allow communities to restrict ownership to older individuals **providing they follow certain guidelines.**

One person **PERMANENTLY** living in each home must be 55 years of age or older.

- The undersigned hereby certifies he/she/they purchased Unit # ___ on _____, 20__.
- I/we understand that Ridgewood Meadows Condominium Association (RMCA) is required by Federal Law to verify the age of the occupants of each home if RMCA is to continue to qualify for the Housing for Older Exemption to the Federal Fair Housing Amendment Act of 1988, as amended.
- The following information is true and correct:
- Full Name of Present Owner(s) of Lot: _____

_____ New Occupant #1 Signature	_____ New Occupant #2 Signature
_____ Print Name	_____ Print Name
Age 55 or Older Yes No (circle one)	Age 55 or Older Yes No (circle one)

Acceptable identification which states I am at least 55 years of age or older attached in the form of _____
_____. (Acceptable proof of age includes driver's license, passport, immigration card, military identification card, birth certificate or other government documents that show birth date.)

I also confirm that no one under the age of 18 lives or will live in my home located in the Ridgewood Meadows community, Unit _____

_____ New Occupant #1 Signature	_____ New Occupant #2 Signature
_____ Print Name	_____ Print Name

In order to retain the 55+ status of Ridgewood Meadows, a census of every home must be taken every other year by BOTH the condominium board and the homeowners board which means one member from each home must sign an affidavit and show proof of age and state that no one under 18 years of age lives in the home. The Condominium Board must register with the state every other year that they comply with the Federal Adult Community Act.

NOTARIZED ACKNOWLEDGMENT

STATE OF _____, COUNTY OF _____

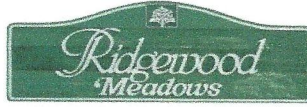
The foregoing instrument was acknowledged before me this _____ day of _____ 20__ by _____
_____ who subscribed and swore to the foregoing instrument, and who is personally known to me or produced _____
_____ as identification and did take an oath.

My Commission Expires Date M/D/YYYY _____ / _____ / _____

Notary Public

Location:

Ridgewood Meadows Condominium Association, Inc.
A55 and Over Community
77A Spoonbill Lane
Ellenton, FL. 34222-0432



Contact:

RMCA
P O Box 118
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941.729.3587

FAIR HOUSING ACT CENSUS – OCCUPANCY CHANGE FORM

Page 2

Occupant 1 Name: _____

Check applicable documents provided:

- _____ Birth Certificate
- _____ Driver's License
- _____ Medicare Card
- _____ Voter's Registration
- _____ Passport
- _____ Other (specify): _____

Occupant 2 Name: _____

Check applicable documents provided:

- _____ Birth Certificate
- _____ Driver's License
- _____ Medicare Card
- _____ Voter's Registration
- _____ Passport
- _____ Other (specify): _____

Copy Photo of ID

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rmcabod1@gmail.com



Contact:
Ridgewood Meadows Condominium

P O Box 118
Ellenton, FL 34222-0432
Phone : 941-729-3587 Email :

EMERGENCY NOTIFICATION FORM

Date M/D/YYYY _____ / _____ / _____

E-mail this form to rmcanote@outlook.com

Mail to RMCA P. O. Box 118, Ellenton Florida 34222

I/We hereby authorize the Meadows Condo Board of Directors to contact the following person(s) in the event of a personal emergency, or that I/we do not return to our home here in the Meadows, or there is an emergency at our home here in the Meadows, while we are gone.

PLEASE PRINT

Your Name (s) : _____

Ridgewood Meadows Address _____

Person to Contact _____

Contact Address _____

Cell Phone _____ Cell Phone _____

Who, here, has a key to your Meadows home? _____

Seasonal Address:

Away address: _____

Away Phone(s) Cell Phone _____ Cell Phone _____

Signature _____ Date _____

Location:
Ridgewood Meadows Condominium Association, Inc.
Associationn, Inc.
A55 and Over Community
77A Spoonbill Lane
Ellenton, FL. 34222-0432
rmcabod1@gmail.com



Contact:
Ridgewood Meadows Condominium
P O Box 118
Ellenton, FL 34222-0432
Phone : 941-729-3587 Email :

EMAIL PERMISSION

Date MM/DD/YYYY _____ / _____ / _____

UNIT # Address _____ / _____

1. Checking the YES box below, you are giving Ridgewood Meadows Condominium Association, Inc. (RMCA) permission to e-mail legal homeowner documentation.
2. Also, permission for email about community business and activities.

() YES () NO

#1 Full Name – Print _____
 Signature _____
 Email _____
 DATE: MM/DD/YYYY _____

#2

1. Checking the YES box below, you are giving Ridgewood Meadows Condominium Association, Inc. (RMCA) permission to e-mail legal homeowner documentation.
2. Also, permission for email about community business and activities.

() YES () NO

Full Name – Print _____
Signature _____
Email _____
DATE: MM/DD/YYYY _____

Location:
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A55 and Over Community
77A Spoonbill Lane
Ellenton, FL. 34222-0432
RMCABOD1@Gmail.com



Contact:
RMCA
P O Box 118
Ellenton, FL 34222-0432
941.729.3587 Office

RIDGEWOOD MEADOWS ESSENTIAL INTERVIEW TOPICS

Date M/D/YYYY ____/____/____

GOVERNMENTAL STRUCTURE AND RESPONSIBILITIES

- Description and responsibilities of RMCA and RHO
- RMCA and RHO working relationship
- Federal and State rules and regulations

SPECIFIC RIDGEWOOD MEADOW BY LAWS AND RULES AND REGULATIONS

- Brief Review of abbreviated Rules and Regulation document
- Violations and Board of Directors response process

QUARTERLY DUES

- Method of payment
- RMCA and RHO dues

RENTALS, LEASING, VISITORS AND GUESTS

- Required forms for rental or lease
- Day passes

AMMENITIES

- Pool uses and rules/restrictions
- Use of clubhouse
- Exercise equipment
- Recreation committee

PETS/ EMOTIONAL SUPPORT ANIMALS

- State, County, and Ridgewood rules
- Emotional Support Animal definition and criteria

UNIT MODIFICATION

- Form for exterior modifications
- Form for paint color approval

VOLUNTEERISM

- Areas of service
- How to get involved
- US military

PARKING AND COMMUNITY SAFTEY

- Review of Rules and Regulations

RMCA Board Member: Print _____ Sign _____ MDYY _____

RMCA Board Member: Print _____ Sign _____ MDYY _____

Prospective Owner. Print _____ Sign _____ MDYY _____

Prospective Owner. Print _____ Sign _____ MDYY _____