

## **Application for Membership - Purchase / Lease**

# Please review application and provide all necessary information and supporting documents.

## **Oasis Community Management**

5100 W. Copans Road, suite 810 Margate, FL 33063 954-653-9790 MyOasisfl.com or <u>contact@oasiscommunitymgmt.com</u>

## **\*\***All applications are to be dropped of at the Margate Location

(Mon-Fri 9:30-4:30 pm / afterhours please use mail slot)

#### Please return the following documents along with the application:

\*\*All documents except the money order may be emailed to: <u>Maria@oasiscommunitymgmt.com</u>, please know that application will not be processed until payment is received. Incomplete Applications will delay the process.

#### **Supporting Documents Check List:**

\_\_ Executed Copy of either the Purchase Contract / Lease Contract

\_\_ Driver's licenses of primary contract holders

\_\_\_\_\_ Car registrations

\_\_\_\_\_ The 2-page application

\_\_\_\_ Money order made payable to Oasis Community Management

#### **APPLICATION FOR MEMBERSHIP EI DORADO ESTATES ASSOCIATION, INC.**

TO: THE BOARD OF DIRECTORS EL DORADO ESTATES ASSOCIATION, INC c/o OASIS COMMUNITY MANANGEMENT 5100 W. COPANS RD, SUITE #810 MARGATE, FL 33063

I (or we) have entered into a contract to purchase Lot \_\_\_\_\_. Block \_\_\_\_\_, EL DORADO ESTATES IN PLANTATION, SECTION \_\_\_\_\_, from the present owner, \_\_\_\_\_\_, and pursuant to the Declaration of Restrictions and Agreement to Purchase, I (or we) hereby submit this, my application, and the \$300.00 Application Fee, for membership in the EL DORADO ESTATES ASSOCIATION, INC., which application and fee, together with the representations and warranties set forth below, are submitted to you as an inducement to said Association to accept for membership, (CASH, CASHIER'S CHECK / MONEY ORDER MADE PAYABLE TO OASIS COMMUNITY MGMT)

Name (and that of spouse):

Current Address Including City, State, and Zip Code

Current Phone Number

Email address:\_\_\_

Previous Addresses for the Past Ten Years:

The names and ages of our resident children, or other immediate family members, who will be residing in El Dorado Estates are:

Cell or Work Number

Age	Age
Age	Age
Age	Age

The nature of my business or profession, business address, and telephone number, and that of my spouse are:

Title & Nature of My Business or Profession

Business Address & Telephone Number

Spouse's Title & Nature of Business or Profession

Spouse's Business Address & Telephone Number

I (or we) understand that membership in the El DORADO ESTATES ASSOCIATION, INC., is conditioned upon the approval of my Application for Membership and upon my becoming the owner of property in EL DORADO ESTATES IN PLANTATION. Accordingly, it is understood that upon becoming a member of said Association, which is designated as a community for dwellings of one single family occupancy only, my ownership and use of property in the subdivision will be subject to the Declaration of Restrictions, as recorded and as subsequently amended, and also to the rules and regulations of the EL DORADO ESTATES ASSOCIATION, INC., as same are, from time to time, imposed pursuant to the Declaration of Covenants and Restrictions, and the By-Laws of said Association. In accordance with the said Declaration of Covenants and Restrictions and By-Laws, I agree that I will neither convey nor attempt to convey said premises to any person, other than members in good standing of EL DORADO ESTATES ASSOCIATIONS, INC.

I (or we) further understand that the ASSOCIATION owns the front four acres of EL DORADO ESTATES, including the entrance, clubhouse, tennis court, playground, etc., and employs the security guards for the benefit of all members. The sole source to provide funds for the upkeep and expenses of such areas and the security guards is derived from monthly assessments paid by members. We agree to pay such assessments chargeable to our own property, and that if we become delinquent, the ASSOCIATION can place a lien against our property. At the present time, the assessment is \$103.00 per home, per month. Be aware that the ASSOCIATION has a *Change Approval Committee*, and if you plan to make any changes to the exterior of your home, driveway or landscaping, it must be approved by the *Change Approval Committee* before such changes may occur.

We would like to volunteer our time and participate in the activities of El Dorado Estates:

Yes \_\_\_\_\_ No \_\_\_\_\_ Our "Special Interests" include: \_\_\_\_\_

**IN WITNESS WHEREOF**, I (or we) have read the above, understand the obligation as a member, and am willing to abide by, and cooperate with, the **ASSOCIATION** to improve and better our community.

Dated this day of	, 20
Buyer's Signature	
Driver's License Number	Date of Birth
Buyer's Signature	
Driver's License Number	Date of Birth

I (or we) \_\_\_\_\_, being the owner(s) of Lot \_\_\_\_\_. Block \_\_\_\_\_, EL DORADO ESTATES IN PLANTATION, SECTION \_\_\_\_\_\_, and being also a member(s) of the EL DORADO ESTATES ASSOCIATION, INC., hereby certify that the foregoing applicant(s) has entered into a contract with me to purchase said lot, if approved for membership in said ASSOCIATION. Accordingly, you may consider this as my request that said applicant be considered by the Board of Directors of the EL DORADO ESTATES ASSOCIATIONS, INC., for membership in said ASSOCIATION.

Seller			
Seller	 	 	 
Date:			