



New Resident Application

Pennbrooke Homeowners Association, Inc.
501 State Road 44
Leesburg, FL 34748
PH: 352-360-1001

FAX: 352-360-1165 or EMAIL: RSOPenn@Outlook.com

**NOTE: THIS APPLICATION IS TO BE SUBMITTED TO
RESIDENT SERVICE OFFICE (RSO) FOUR (4) WEEKS PRIOR TO CLOSING**

Welcome to Pennbrooke Fairways! As a potential resident, be advised there are various deed restrictions that may impact you, your family, tenants, and anyone residing at your residence in Pennbrooke. Prior to closing, the seller/closing agent must provide you with a copy of Pennbrooke Homeowners' (PHOA) Articles of Corporation, By-Laws, Covenants and Restrictions, and Rules for Community Living.

1. Pennbrooke Fairways is a planned adult "Fifty-Five Plus" community. To maintain this status eighty percent (80%) of all homes in the community must be occupied by at least one resident fifty-five (55) years of age or older. (See the *Second Supplement to the Amended Declaration of Covenants and Restrictions*)
2. All permanent residents must be eighteen (18) years of age or older.
3. No home may be rented for any period that is less than three (3) months, and no owner may rent a home more than three (3) times in any calendar year (regardless of whether a lease has been terminated prior to the end of its term). Short term rentals of a property either directly by the owner or by the owner through an online marketplace and hospitality service website (e.g. Airbnb) is strictly prohibited.

Please be advised, failure to meet the statutory requirements as stated above could adversely impact your transfer of title or contract for tenancy in Pennbrooke Fairways.

Please check which of the following statement that applies to you.

1. ☐ Party to a contract (or other conveyance) to purchase real property in Pennbrooke Fairways and will reside either on a Full-Time or Seasonal basis.
2. ☐ Party to a contract (or other conveyance) to purchase real property in Pennbrooke Fairways and **will not** reside on a Full-Time or Seasonal basis. (Check appropriate box below)
 - a. ☐ Purchasing this property as an investment property and **do not** plan to lease/rent the property.
 - b. ☐ Purchasing this property as an investment property and will lease/rent the property on a full or part time basis to a tenant. (Application for Temporary Residency must be completed.)

It is the property owner's responsibility to insure the following:

- All OCCUPANTS of the residence must meet the above referenced age requirements.
- Any lease/rental agreement must be in writing and in accordance with the provisions of all PHOA's Articles of Corporation, By-Laws, Covenants and Restrictions, and Rules for Community Living.
- All TENANTS agree in writing to abide by all PHOA's Articles of Corporation, By-Laws, Covenants and Restrictions, and Rules for Community Living.
- An approved *Application for Temporary Residency* must be on file at the PHOA Community Manager's Office prior to occupancy.

PREVIOUS OWNER: _____

LOT: _____

NAME: _____

☐ RSO Rec'd
☐ Copy to File

Office Use:

As a party to a contract to purchase (or any other legal conveyance) of real property in Pennbrooke Fairways, the Pennbrooke Homeowners Association (PHOA) has authority to review and approve all contracts of conveyance associated with any property in the community. (See the Amended Declaration of Covenants and Restrictions Article XIV Conveyances pg. 17).

Please provide the following information to expedite this process:

PROPERTY ADDRESS to be purchased: _____

Lot Number: _____ **Estimated Closing Date:** _____

Title Office (closing service) _____ **Realtor** _____

You must list all occupants that will be residing in the home (Full-time or Seasonal basis).

Print Full Legal Name of Each Occupant	Date of Birth

Please provide evidence of identity and birth date such as Driver's License, Birth Certificate, Passport or other state issued legal documents. **Photo copies are required and will be maintained on file.**

1.Applicant's Signature: _____ Date: _____

Print Name: _____ PH: _____ ☐ Cell

e-mail address: _____

2. Applicant's Signature: _____ Date: _____

Print Name: _____ PH: _____ ☐ Cell

e-mail address: _____

☐ **Application Approved**

☐ **Application NOT Approved** – Reason: _____

BOD's Signature: _____ **Date:** _____