TOPAZ AT SAPPHIRE LAKES Condominium Association, Inc.

c/o Resort Management 2685 Horseshoe Drive South, Suite #215 Naples, Florida 34104 239.649.5526 FAX 239.403.1061

APPLICATION FOR APPROVAL TO PURCHASE OR LEASE CONDOMINIUM UNIT

Please check appropriate box and complete the following information.

()	I hereby apply for approval to PURCHASE (Street Address) Unit #,
	in Topaz at Sapphire Lakes, a Condominium, and for membership in the Association.
	A complete copy of the signed Purchase Agreement and the \$75.00 Certificate of Approva
	of Sale (payable to Resort Management) are attached.
()	I hereby apply for approval to LEASE (Street Address) Unit #, in Topaz at Sapphire Lakes, a Condominium, for the period beginning 20and
	in Topaz at Sapphire Lakes, a Condominium, for the period beginningandand
	ending 20 This unit must not be leased for less than thirty (30) days or
	more than three (3) times per year. A copy of the signed lease is attached.
Not	e: Application must be submitted, along with a \$150.00 Processing Fee (payable in 2 checks: \$75.00
	to Resort Management, and \$75.00 to Topaz of Sapphire Lakes). TOPAZ AT SAPPHIRE LAKES
	REQUIRES AT LEAST 30 DAYS FOR APPROVAL OF SALE AND LEASE APPLICATIONS.
ln c	rder to facilitate consideration of this application. I represent that the following information is factual and correct
	agree that any falsification or misrepresentation in this application will justify its disapproval. I consent to you
	ner inquiry concerning this application, particularly of the references given below.
Ow	ner Name (s):
	PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION
1.	Full Name of Applicant:
2.	Full Name of Spouse: Home Address: City: Business Phone # () Finall address:
3.	Home Address: City: State: Zip:
	Home Phone #: () Business Phone # ()
	Email address:
4.	Nature of Business / Profession:
	If Retired, Former Business/ Profession:
5.	Company of Firm Name:
6.	Business Address: City: State: Zip:

		ost recent landlord:				
	City:	State:	Zip:		Phone: (
9.		nces not related to ap				
	Name:				Phone: () -
		ritten reference letter				
	Two Credit reference Name:	s (local if possible)			Phone #: ()
	Address:		City:		State:	Zip:
	Address:				State:	ZIP:
11.I	Person to be notified i Name:	in case of Emergency:	Phone #:			
/	Address:		City:		State: _	Zip:
		the Condominium: (m				State:
		Year:				
No	Commercial Vehicles	-owned, leased or ope o Motorcycles are allow	erated by a le	essee or the	eir guests are	allowed to be parked
1.81 1	Mailing Address for N Name:	otices Connected with	this Property	/: Phone	#:	
/	Address:		City:		State:	Zip:
		Sale, please check on init with the intention to a full-time basis		wing:		
	() Reside here pa	rt-time				
	() Lease the Unit					
	I (we) will provide the	e Association with a <u>cc</u>	ppy of our re	corded de	ed within (10) days after closing.

15. I am aware of, and agree to abide by the Declaration of Condominium for Topaz at Sapphire Lakes, a Condominium, the Articles of Incorporation, By-Laws and any and all properly promulgated Rules and Regulations. I acknowledge receipt of a copy of the Association rules.

16. I understand and agree that the Association, in the event it approves the lease, is authorized to act as the owner's agent, with full power and authority to take whatever action may be required, including eviction, to prevent violations by lessees and their guests, of provisions of the Declaration of Condominium of Topaz at Sapphire Lakes, The Association's by-laws, and the rules and regulations of the Association.

RENTERS ARE NOT ALLOWED TO HAVE PETS

AUTHORIZATION: I/We hereby authorize Resort Management, Inc., and/or Topaz at Sapphire Lakes Association, to verify all information contained on the application.

COLLECTION OF RENT FROM TENANTS ON DELINQUENT UNITS: THE ASSOCIATION MAY COLLECT RENT DIRECTLY FROM A TENANT OF A UNIT IF THE UNIT OCCUPIED BY THE TENANT IS DELINQUENT IN PAYMENT OF ASSESSMENTS IN EXCESS OF THIRTY (30) DAYS. ANY RENT MONEY COLLECTED BY THE ASSOCIATION SHALL BE USED TO OFFSET THE ASSESSMENTS NOT BEING PAID. ANY REMAINING RENT MONEY SHALL BE REMITTED TO THE OWNER ONY WHEN THE OWNER BECOMES CURRENT IN THE CHARGES OR ASSESSMENTS.

Dated:				
		Ap	pplicant	
		Ap	pplicant	
NO APPLICATION WILL BE AND HAVE A COPY OF THE				· ·
() Application Approved		() Disapproved		
Date:	_By: _	Board of Directors		Title





BACKGROUND/CREDIT CHECK APPLICATION

		PROPERTY IN	FORMA	ΓΙΟΝ		
	Address			City	State	Zip Code
Move-In Date	Move-out Date	(if applicable)				
	- !!	PRIMARY A	APPLICAI			
	Full Name			Date of Birth	Social Se	curity Number
	Present Add	rocc		Procent City	State	7in Codo
	Present Addi	622		Present City	State	Zip Code
Primary Phone Numbe	ar	Drivers License Number		Pri	mary Email Addr	200
Trimary Trione Ivamoe	·1	Divers Electise Number		- 111	mary Email Addit	
		SECONDARY APPLICA	ANT (IF A	APPLICABLE)		
	Full Name			Date of Birth	Social Se	curity Number
						·
	Present Add	ess		Present City State Zip Coo		
Primary Phone Numbe	er	Drivers License Number		Pri	mary Email Addr	ess
I/we authorize Resort Man	agement and Re	ental History Reports to do a c	omplete in	vestigation of all inform	mation provided w	vith my application for
		eviewed all information within the			•	-
		ory References (including MPHA action only and continues for (1)				
effect for the maximum peri	od, not to exceed	d (1) year, allowed by law. I acknow	owledge that	at Rental History Report	s provides reports l	oy written, electronic or
		ny choice and does not participa ges and agrees with all terms ab			_	
•		arising out of or relating to this		·		
		dance with its Commercial Arbitr	ation Rules	, and judgment on the a	ward rendered by	the arbitrator(s) may be
entered in any court having j	urisdiction there	ot.				
Primary Applicant Signa	ature	Date	Second	dary Applicant Signa	ture	Date

TOPAZ AT SAPPHIRE LAKES CONDOMINIUM ASSOCIATION, INC.

C/O RESORT MANAGEMENT 2685 HORSESHOE DRIVE SOUTH, SUITE 215 NAPLES, FL 34104

GUEST RESGISTRATION

A completed copy of this form must be received, by Resort Management, no later than **one week** before the arrival of non-paying guests, who will occupy a unit in the absence of the owner. Mail or Fax (239) 403-1061 to Resort Management. **Note:** Guests are prohibited from having pets on the property. Only **REGISTERED** guests may occupy the unit, they are not to invite others to occupy the unit.

Please type or print legibly the following information

Unit No					
Date of Arrival	Date o	Date of Departure			
Names of All Guests:					
					
	-550	**		_	
Owner's Name:	_			Phone:	
Address:	City		_ State _	Zip	
———— Phone Number Guest can be reached	at:				
Person to Contact in case of EMERGE	NCY:				
Address:		_ Phone:			
Vehicles to be kept on Property during	Occupanc	y:			
Make/Model	•	•			
State					
Make/Model	Year	Lic. #			
State					

Relationship of Guest												
with the Rules and acknowledge the right	Regulations of TOPAZ at Sapphire of the Association to ask us to vacate	e Lakes. I/We also										
Date Signature	Guest Signature	Guest										
- site Guesi												
	Owne	r's Signature										

TOPAZ AT SAPPHIRE LAKES CONDOMINIUM ASSOCIATION

2022 APPROVED BUDGET

1/1/22 - 12/31/22

DATE: 11/1/21

	EXPENSES				
	GENERAL ADMINISTRATIVE			MAJOR MECHANICAL	
7120	Annual Fees & Licenses	62.00	8720	Fire Alarms/Extinguishers	1,500.00
7125	Fees Payable To Division	176.00		SUBTOTAL	\$ 1,500.00
7130	Insurance-Liability//Property	39,500.00			
7145	Office Supplies/Postage	1,500.00		OTHER	
7147	Background Checks	300.00	9510	Reserve Fund Contribution	45,078.00
7155	Appraisal	260.00		SUBTOTAL	\$ 45,078.00
7160	Tax Prep/Legal	215.00		TOTAL EXPENSES	\$ 248,244.00
7210	Management Services	5,364.00			
7250	Master Association	113,691.00		INCOME	
	SUBTOTAL	\$ 161,068.00	6110	Maintenance Fees	231,440.00
			6810	Carryover	15,044.00
	UTILITIES		6910	Master Planting Credit	1,760.00
8010	Electric	1,000.00		TOTAL INCOME	\$ 248,244.00
8040	Water & Sewer	24,000.00			
	SUBTOTAL	\$ 25,000.00			
	MAINTENANCE & REPAIR				
8330	Flowers & Plantings (from Master)	1,760.00		NUMBER OF UNITS	44
8410	Building Mtce & Supplies	3,000.00		YRLY MTCE FEE PER UNIT	\$ 5,260.00
8430	Janitorial Services	7,600.00		QTRLY MTCE FEE PER UNIT	\$ 1,315.00
8450	Pest Control - Interior	1,152.00		MONTHLY MTCE FEE PER UNIT	\$ 438.33
8455	Termite Treatment	2,086.00			
	SUBTOTAL	\$ 15,598.00			

TOPAZ AT SAPPHIRE LAKES CONDOMINIUM ASSOCIATION

2022 APPROVED RESERVE PLAN

1/1/22 - 12/31/22

DATE: 11/1/21

	EST	EST	EST	12/31/2020	2021	2021	2021	12/31/2021	2022
DESCRIPTION	LIFE	REMAIN	REPLACE	FUND	CONTRIB	EXPEND	REALLOCATE	EST	FULL FUND
		LIFE	COST	BALANCE				BALANCE	CONTRIB
Painting	8	3	34,000.00	28,000.00	-	-	-	28,000.00	2,000.00
Roofs-228,260,292,324	20	1	250,000.00	179,761.00	35,120.00			214,881.00	35,119.00
Awnings /Bldgs. & Carports	10	8	10,200.00	897.84	1,034.00			1,931.84	1,034.00
Carport Painting	8	3	6,500.00	5,800.00				5,800.00	233.00
Carport Roofs	20	1	46,000.00	38,615.95	3,692.00			42,307.95	3,692.00
Building Electrical Panels	5	2	15,000.00	6,000.00	3,000.00			9,000.00	3,000.00
Unallocated Interest				8,263.51	370.00			8,633.51	
General Reserve Fund								-	-
TOTAL			\$ 361,700.00	\$ 267,338.30	\$ 43,216.00	\$ -	\$ -	\$ 310,554.30	\$ 45,078.00

Reserve replacement costs and estimated remaining useful lives are projections based on estimates and current industry standards. Even if the Association is currently fully funding the reserves, the accumulated amounts may not be adequate to meet all future repairs and replacements. If additional funds are needed the Association has the right to increase regular assessments, levy special assessments, borrow or delay repairs and replacements until funds are available.

Topaz at Sapphire Lakes

Frequently Asked Questions and Answers Sheet 2022

- Q: What are my voting rights in the condominium association?
- A: The Owner of each unit shall have one vote. No vote is divisible.
- Q: What restrictions exist in the condominium documents on my right to use my unit?
- A: Permanent occupancy is limited to two persons per bedroom and one person per den. Two household pets per unit are permitted, limited to domestic dogs not to exceed thirty pounds, domestic cats, or caged birds, or one fish tank not to exceed 55 gallons. See Article 19 of the Declaration of Condominium.
- Q: What restrictions exist in the condominium documents on the leasing of my unit?
- A: No unit owner may dispose of a unit or any interest therein by lease without approval of the Association. No lease shall be approved for a term of less than thirty days or one calendar month, whichever is less and no single unit may be leased more than three times in any one calendar year.
- Q: How much are my assessments to the condominium for my unit due and when are they due?
- A: \$1,315.00 due per quarter.
- Q: Do I have to be a member in any other association? If so, what is the name of the association and what are my voting rights in this association? Also, how much are my assessments?
- A: The Condominium is a member in Sapphire Lakes Master Association. Unit owners are subject to the Master Covenants and pay dues. Master Association fees are included in the Condominium Association fees. The Condominium Association designates a representative who votes on behalf of the condominium; individual unit owners do not cast votes.
- Q: Am I required to pay rent or land use fees for recreational or other commonly used facilities? If so, how much am I obligated to pay annually?
- A: No.
- Q: Is the condominium association or other mandatory membership association involved in any court cases in which it may face liability in excess of \$100,000? If so, identify each such case.
- A: No.

NOTE: THE STATEMENTS CONTAINED HEREIN ARE ONLY SUMMARY IN NATURE. A PROSPECTIVE PURCHASER SHOULD REFER TO ALL REFERENCES, EXHIBIT HERETO, THE SALES CONTRACT AND THE CONDOMINIUM DOCUMENTS.