

Longshore

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APPLICATION FOR CERTIFICATE OF APPROVAL LONGSHORE LAKE PROPERTY TRANSFER

Please fill in the following required information for a property transfer within Longshore Lake. **The Application must be faxed, returned in person or by mail prior to Closing.** The **Certificate of Approval** will be issued to the closing agent for filing when all funds due the Foundation have been paid. The transfer fee is \$150.00.

Lot Number _____

Address of Property _____

Name(s) of Purchaser(s) _____

Purchaser Billing Address _____

Telephone Number(s) _____

E-Mail Address _____

Names(s) and date of birth of all occupants residing with the owner:

Date of Move-In _____

Buyer's Intended Use of Home: Year Round Resident Seasonal Vacation Home
 Rental (Must be approved by the Foundation)

Names(s) of Seller(s) _____

Seller Address _____

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CHARGE AUTHORIZATION

Longshore Lake Foundation offers a club charge account system for all owner-members of the Foundation. Tennis and Food & Beverage purchases, including tennis lessons, clinics, etc. may be charged on this account. You will receive a monthly statement for all maintenance assessments as well as any club charges.

Your membership number is the same as your lot number. Your membership cards will be ordered and available from the Administration Office within 10 days of Closing. Your cards will be mailed to you unless otherwise specified. Until then, please advise your server of your name and lot number for billing.

Please complete the following information and return as soon as possible to the Administration Office. You must initial the appropriate line if you wish other members of your family to having signing privileges on your account. If changes occur after initial registration, please advise the Administration Office in order to keep your file current. You can authorize signing privileges to any member of your family, but only family members who reside permanently in your home.

Resident Lot Number _____

Owner-Member Name _____

Name(s) of Seller(s) _____

Billing Address (if different) _____

Additional Family Names _____

I hereby accept responsibility for all charges on my account make by those listed above.

Owner-Member Signature

11399 PHOENIX WAY ▪ NAPLES, FLORIDA 34119
PHONE: (239) 566-2304 ▪ FAX: (239) 566-7594

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OWNER'S INTENTION TO SELL LONGSHORE LAKE PROPERTY TRANSFER

Please fill in the following required information for a property transfer within Longshore Lake.

Lot Number _____

Address of Property _____

Name(s) of Seller(s) _____

Seller's New Address _____

Telephone Number _____

Name(s) of Buyer(s) _____

1 1399 PHOENIX WAY ▪ NAPLES, FLORIDA 341 19
Phone: (239) 566-2304 ▪ Fax: (239) 566-7594

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RECEIPT OF DOCUMENTS LONGSHORE LAKE PROPERTY TRANSFER

I, the undersigned, acknowledge that I have received the following documents from the Seller or the Seller's Agent with regard to my purchase of property at Longshore Lake:

1. Declaration of General Protective Covenants
2. Articles of Incorporation for Longshore Lake Foundation
3. By-laws for Longshore Lake Foundation
4. Architectural Review Board Guidelines
5. Notice of Sale and Resale Capital Contribution Fee

Date

Signature of Buyer

Printed Name

Date

Signature of Buyer

Printed Name

Block and Lot Number

LONGSHORE LAKE FOUNDATION, INC.

Personal Information Update

As part of our commitment to your personal security at the Main Entry Gate, Longshore Lake is implementing a new visitor access control program. In doing so, we want to make sure the information we have for you is correct. Please complete the following form and drop it off at the main office as soon as possible. Thank you for your timely response.

Head of Household

First Name _____ Last Name _____ Suffix _____

Street Address: _____

Own or Rent (please circle one)

Home Phone: _____ Mobile Phone: _____

Work Phone: _____ Other Phone: _____

Which one should we use as your **primary phone number**? Home Mobile Work Other

E-mail Address: _____ I don't have an email address

4-digit PIN: (This PIN will be used as the password for accessing your profile, with your **primary phone number** above)

Other Residents

Please list anyone living with you in the table below. This would include your spouse and family members as well as anyone not related to you.

First Name	Last Name	Date of Birth	Relation
			<input type="checkbox"/> Spouse <input type="checkbox"/> Son <input type="checkbox"/> Daughter <input type="checkbox"/> Parent <input type="checkbox"/> Other: _____
			<input type="checkbox"/> Spouse <input type="checkbox"/> Son <input type="checkbox"/> Daughter <input type="checkbox"/> Parent <input type="checkbox"/> Other: _____
			<input type="checkbox"/> Spouse <input type="checkbox"/> Son <input type="checkbox"/> Daughter <input type="checkbox"/> Parent <input type="checkbox"/> Other: _____
			<input type="checkbox"/> Spouse <input type="checkbox"/> Son <input type="checkbox"/> Daughter <input type="checkbox"/> Parent <input type="checkbox"/> Other: _____
			<input type="checkbox"/> Spouse <input type="checkbox"/> Son <input type="checkbox"/> Daughter <input type="checkbox"/> Parent <input type="checkbox"/> Other: _____
			<input type="checkbox"/> Spouse <input type="checkbox"/> Son <input type="checkbox"/> Daughter <input type="checkbox"/> Parent <input type="checkbox"/> Other: _____

Contractors

Please list contractors below. This includes any daily employees as well as scheduled services.

Name (if applicable)	Company	Phone Number	Type
			<input type="checkbox"/> Housekeeper <input type="checkbox"/> Lawn/Pool Service <input type="checkbox"/> Childcare <input type="checkbox"/> Healthcare <input type="checkbox"/> Other
			<input type="checkbox"/> Housekeeper <input type="checkbox"/> Lawn/Pool Service <input type="checkbox"/> Childcare <input type="checkbox"/> Healthcare <input type="checkbox"/> Other
			<input type="checkbox"/> Housekeeper <input type="checkbox"/> Lawn/Pool Service <input type="checkbox"/> Childcare <input type="checkbox"/> Healthcare <input type="checkbox"/> Other
			<input type="checkbox"/> Housekeeper <input type="checkbox"/> Lawn/Pool Service <input type="checkbox"/> Childcare <input type="checkbox"/> Healthcare <input type="checkbox"/> Other

Permanent Visitor List

Please list any regular visitors in the table below. This could include family not living with you or friends that should be admitted by security without calling you first.

First Name	Last Name

Pets

Please list any pets in the tables below.

Type, Color & Breed	Name & Tag Information

Please complete and return this form to the Administration Office at your earliest convenience. If you have any questions or need assistance filling out the form, please stop by the Office or call 239-566-2304.

Thank you

For HOA Use Only		<input type="checkbox"/> Collected	<input type="checkbox"/> Verified	<input type="checkbox"/> Assigned	<input type="checkbox"/> Entered
T1	T2	T3	T4	T5	
T6	C1	C2	C3	C4	

DATE _____

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LOT # _____

RESIDENT VEHICLE INFORMATION

PLEASE PRINT

Last Name _____

First Name _____ Spouse _____

Street Address _____

City _____ State _____ Zip _____

Phone _____

E-Mail _____

Vehicles

Year	Make	Model	Color	Tag#	State	Bar Code	Decal	Remove Date
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____

Boats

Boat Type _____ Boat Registration _____

Notice of Sale and Resale Contribution Fee

On March 8, 2006, the Longshore Lake Foundation, Inc. Board of Directors confirmed the majority vote made by residents at the March 6, 2006 Annual Meeting to increase the capital contribution fee from \$1,000.00 (One Thousand dollars) to \$1,500.00 (One Thousand Five Hundred dollars) on new home and resale home purchases. They also authorized the Board of Directors to change the fee upon their majority vote to remain competitive.

On June 18, 2011 the Board of Directors unanimously voted to increase the fee to \$2,500.00. The increased fee is payable at closing by the buyer for all sales contracts signed on or after August 1, 2011.

This fee will not apply to transfers of property between immediate family members or when an owner refinances his mortgage.

The addendum is now part of the Amended and Restated Declaration of Protective Covenants for Longshore Lake Foundation, Inc., under Section 12.3 Procedures, paragraph (A) (1).

Longshore Lake Foundation, Inc.
FY 2012 Consolidated Budget

	FY 2012 Proposed	FY 2011 Budget	Difference
Operating Budget			
Income:			
Annual Operating Assessment	\$ 1,541,497	\$ 1,539,736	\$ 1,761
Finance & Late Payment Charges	\$ 31,925	\$ 32,645	\$ (720)
Cash Carry Forward	\$ 85,190	\$ 34,866	\$ 50,324
Transfer Fees	\$ 5,700	\$ 5,700	\$ -
Other Income	\$ 58,008	\$ 44,480	\$ 13,528
Total Funds Available	\$ 1,722,320	\$ 1,657,427	\$ 64,893
Expenditures:			
Administrative Expenses	\$ (777,054)	\$ (728,808)	\$ (48,246)
Maintenance Common Areas	\$ (608,216)	\$ (597,481)	\$ (10,735)
Food & Beverage	\$ (228,858)	\$ (232,794)	\$ 3,936
Tennis Department	\$ (105,051)	\$ (95,222)	\$ (9,829)
Lot 39 Expense	\$ (3,141)	\$ (3,122)	\$ (19)
Total Expenditures	\$ (1,722,320)	\$ (1,657,427)	\$ (64,893)
Excess of Revenue over Expense	\$ -	\$ -	\$ -
Reserve Budget			
Capital Reserve	\$ 439,945	\$ 452,505	\$ (12,560)
Surplus from prior year	\$ 22,731	\$ 58,061	\$ (35,330)
Insurance	\$ -	\$ 1,884	\$ (1,884)
Capital Reserve Assessment	\$ 236,339	\$ 227,260	\$ 9,079
Resale Capital Contribution Fee	\$ 50,000	\$ 69,000	\$ (19,000)
Interest Income	\$ 1,338	\$ 1,634	\$ (296)
Estimated Expenses	\$ (521,333)	\$ (370,399)	\$ (150,934)
Total Capital Reserve	\$ 229,020	\$ 439,945	\$ (210,925)
Hurricane Reserve	\$ 50,000	\$ 50,000	\$ -
Total Reserve Balance	\$ 279,020	\$ 489,945	\$ (210,925)
Quarterly Assessments			
For Operating Budget	\$ 718.50	\$ 695.50	\$ 23.00
Less Collections from 2011	\$ (37.63)	\$ (15.40)	\$ (22.23)
Net quarterly Assessment	\$ 680.87	\$ 680.10	\$ 0.77
For Reserve Budget	\$ 114.43	\$ 100.38	\$ 14.05
Less Surplus from FY 2011	\$ (10.04)	\$ -	\$ (10.04)
Net Quarterly Assessment	\$ 104.39	\$ 100.38	\$ 4.01
Total Quarterly Assessment 2012	\$ 785.26	\$ 780.48	\$ 4.78

Note: The reduction in assessments for 2012 is possible because we had a cash surplus in the 2011 Operating Budget that was used to reduce the reserve assessment and collections from past due delinquents accounts that was used to reduce the operating budget assessment.