

# **BARRINGTON CLUB CONDOMINIUM ASSOCIATION, INC.**

**C/o SOUTHWEST PROPERTY MANAGEMENT  
CORPORATION**

1044 CASTELLO DRIVE, SUITE #206  
NAPLES, FLORIDA 34103-1900  
(239) 261-3440 ext112 ☐ FAX: (239) 261-0562

## **Purchase Application Check-Off Sheet**

**If your application does not have the following attached, it will be returned to you, delaying your approval:**

- A completely filled out and legible **application**. Please make sure the applicant(s) and owner or owner's agent have signed the application.
- Two (2) completed **Character Reference Forms** (see attached.) Please have these forms completed by someone (non-related) that has known the applicant(s) for a considerable amount of time and return them with your application. **(Not applicable to Current Owners.)**
- Completed and signed **Pet Addendum Form**.
- Signed Acceptance of **Rules and Regulations**.
- A legible copy of the **Sales Contract** signed by both parties.
- The \$100 non-refundable **application fee**. If paying by check or money order, please make payable to: **Barrington Club Condominium Association**.

If you should have any questions regarding the application procedure, please contact our Sales/Lease Administrator, at the number shown above. **Thank you!**

## **INSTRUCTIONS ON HOW TO OBTAIN CONDO DOCUMENTS**

Please hand this out or email to anyone requesting

- **If your Association has a Website, current owners can obtain access to their website and print a copy of their association documents.**

OR

- **To download and copy association documents from the Lee or Collier County Websites:**

You can print a set off the clerk's website for free. You should verify with the clerk's office that the set you are downloading is current or you will have to search for any additional amendments. If there are additional items, the clerk's office should be able to direct you further.

**LEE COUNTY** (Phone: 239-533-5000)

Go on Internet: [www.leeclerk.org](http://www.leeclerk.org)

✓ Search/Download Official Records

✓ Public Search

✓ Accept Condition

Party Type: Direct

Type in Name of Association

Document Type: DOC

✓ Click on SEARCH RECORDS

Scroll down page for results

**COLLIER COUNTY** (Phone: 239-252-2745)

Go on Internet: [www.collierclerk.com/RecordsSearch/OfficialRecords](http://www.collierclerk.com/RecordsSearch/OfficialRecords)

Scroll down and click on Accept

✓ Click on Document Search

Business Name: *type in Association name*

Document Type: Scroll down and highlight DECL

✓ Begin Search

Click on PDF icon to pull up document

- **FOR REQUESTOR TO ORDER A SET OF CURRENT DOCUMENTS**

Contact Collier Abstract by emailing [collierabstract@yahoo.com](mailto:collierabstract@yahoo.com) or fax to 239-643-6822. Their phone number is 239-643-5252. It is an answering machine which will be responded to within 24 hours. Collier Abstract will take a credit card number for payment of fee and mail the copy directly to caller. The fee to order is \$50 and is guaranteed to have the up-to-date documents with any amendments.

Collier Abstract usually makes these documents available within 24 hours.

# Barrington Club Condominium Association, Inc.

% Southwest Property Management Corp.  
1044 Castello Drive, Suite #206  
Naples, Florida 34103-1900  
(239) 261-3440 ♦ FAX: (239) 261-0562  
EMAIL: RViera@SWPropMgt.com

## APPLICATION FOR APPROVAL TO PURCHASE OR LEASE CONDOMINIUM UNIT

Revised December 2009

**TO: The Board of Directors of Barrington Club Condominium Association, Inc.**

- I hereby apply for approval to **PURCHASE** Unit # \_\_\_\_\_, in Barrington Club, a Condominium, and for membership in the Condominium. **A complete copy of the signed purchase agreement is attached.**
- I hereby apply for approval to **LEASE** Unit # \_\_\_\_\_, in Barrington Club, a Condominium, for the period beginning \_\_\_\_\_, \_\_\_\_\_, and ending \_\_\_\_\_, \_\_\_\_\_. **A copy of the signed lease is attached. (TERM: 30 day minimum, 1 year maximum. This Unit can not be leased more than 3 times per year.)**

*In order to facilitate consideration of this application, I represent that the following information is factual and correct, and agree that any falsification or misrepresentation in this application will justify its disapproval. I consent to your further inquiry concerning this application, particularly of the references given below:*

### PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION

1. **Full Name of Applicant** \_\_\_\_\_
2. **Full Name of Spouse** \_\_\_\_\_
3. **Home Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_ **Zip** \_\_\_\_\_  
**Home Phone # ( \_\_\_\_\_ )** \_\_\_\_\_ **Business Phone # ( \_\_\_\_\_ )** \_\_\_\_\_  
**Email Address:** \_\_\_\_\_
4. **Nature of Business/Profession** \_\_\_\_\_  
\_\_\_\_\_  
If Retired, Former Business/Profession \_\_\_\_\_
5. **Company or Firm Name** \_\_\_\_\_
6. **Business Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_ **Zip** \_\_\_\_\_
7. The Condominium Documents of Barrington Club, a Condominium, provide an obligation of unit owners that all units are to be used as single family residences only. Please state name, relationship and age of all other persons who will be occupying the unit on a regular basis.

Name	Relationship	Age
_____	_____	_____
_____	_____	_____

8. **Current Address: Ownership: How long?** \_\_\_\_\_ **Rented How Long?** \_\_\_\_\_  
If Rented, Name of Current or Most Recent Landlord: \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State** \_\_\_\_ **Zip** \_\_\_\_\_  
**Phone #:** ( \_\_\_\_\_ ) \_\_\_\_\_
9. **Two Personal References NON-FAMILY MEMBERS**  
Please have references complete the attached Character Reference Forms and submit them with this application. **(Not applicable to Current Owners or Repeat Tenants. Please indicate for which Unit# \_\_\_\_\_)**
10. **Two Credit References (Not applicable to Current Owners or Repeat Tenants)**  
**Name** \_\_\_\_\_ **Phone #** \_\_\_\_\_  
**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_ **Zip** \_\_\_\_\_  
**Name** \_\_\_\_\_ **Phone #** \_\_\_\_\_  
**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_ **Zip** \_\_\_\_\_

11. **Person to be Notified in Case of an Emergency** \_\_\_\_\_  
 Address \_\_\_\_\_ City/State \_\_\_\_\_  
 Relationship \_\_\_\_\_ Phone # \_\_\_\_\_
12. **Make/Model of Car(s) to be Kept at the Condominium: No trucks, pick ups, campers, trailers or motorcycles are permitted on the property unless it is kept within an enclosed garage.**  
 \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_  
 \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_  
 \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_
13. **Mailing Address for Notices Connected with this Application**  
 Name \_\_\_\_\_ Phone # \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
14. **CIRCLE NUMBER THAT APPLIES TO THE FOLLOWING**  
**If this transaction is a Sale, I/We are purchasing this Unit with the intention to:**  
 (1) Reside here on a full-time basis  
 (2) Reside here part-time  
 (3) Lease the Unit.  
 I/We will provide the Association with a copy of our recorded deed within ten (10) days after closing.
15. I/We are aware of, and agree to abide by the Declaration of Condominium of Barrington Club Condominium Association, Inc., the Articles of Incorporation, By-Laws, and any and all properly promulgated Rules and Regulations. Please note: Seller needs to provide Documents.
16. I have received a copy of the Rules and Regulations of Barrington Club from the owner.  
 YES  NO
17. **THIS APPLICATION WILL NOT BE CONSIDERED WITHOUT THE \$100.00 NON-REFUNDABLE APPLICATION FEE**  
Make check payable to: Barrington Club Condominium Association, Inc.

**SALE**

\_\_\_\_\_  
 Seller Seller  
 \_\_\_\_\_  
 Purchaser Purchaser

**RENTAL**

\_\_\_\_\_  
 Lessee Lessee  
 \_\_\_\_\_  
 Lessor Lessor

**PLEASE RETURN THE COMPLETED & SIGNED APPLICATION, 2 REFERENCE FORMS, SIGNED ACCEPTANCE OF RULES & REGULATIONS, ALONG WITH THE \$100 APPLICATION FEE TWENTY (20) DAYS PRIOR TO OCCUPANCY OR CLOSING TO:**

Southwest Property Management Corp.  
 1044 Castello Drive, Suite #206  
 Naples, Florida 34103-1900

<b><u>ACTION TAKEN BY BOARD OF DIRECTORS</u></b>		
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	Date: _____
By: _____		
(Board Member)	(Office)	
<b>ANY APPROVAL IS VOID IN THE EVENT OF FALSE STATEMENTS IN THE ABOVE APPLICATION</b>		

**Barrington Club Condominium Association, Inc.**

**PET ADDENDUM FORM**

**Per the Association Rules and Regulations:**

**The owners or renters of each unit may keep two dogs or cats (or one of each) weighing not more than 25 pounds each. No reptiles, rodents, amphibians, birds, poultry, swine or livestock may be kept in the unit.**

**Unit Owner or Renter Information:**

Names: \_\_\_\_\_ Unit #: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Rental Agent Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Pet Information:**

**Pet #1-** Pet's Name \_\_\_\_\_ License # \_\_\_\_\_

Type: \_\_\_\_\_ Breed: \_\_\_\_\_

Weight: \_\_\_\_\_ Color/Markings: \_\_\_\_\_

**Pet #2-** Pet's Name \_\_\_\_\_ License # \_\_\_\_\_

Type: \_\_\_\_\_ Breed: \_\_\_\_\_

Weight: \_\_\_\_\_ Color/Markings: \_\_\_\_\_

**I/We acknowledge having read the section of the Barrington Club Condominium Association Rules and Regulations pertaining to pets, and agree to comply with the provisions of this section.**

**Signature of Owner or Renter:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Owner or Renter:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please complete and return with your application to:**  
**Southwest Property Management, 1044 Castello Drive, Suite #206, Naples, FL 34103**

# SOUTHWEST PROPERTY MANAGEMENT

CORPORATION

1044 CASTELLO DRIVE, SUITE #206  
NAPLES, FLORIDA 34103-1900  
(239) 261-3440 ♦ FAX: (239) 261-0562  
E-mail: [RViera@SWPropMgt.com](mailto:RViera@SWPropMgt.com)

## Character Reference Form

\_\_\_\_\_, 20\_\_\_\_.  
(Date)

Applicant's Reference's Name (Please print): \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Telephone #: \_\_\_\_\_

RE: Applicant's Name: \_\_\_\_\_

Association Applying To: **Barrington Club Condominium** \_\_\_\_\_

To Whom It May Concern:

The applicant(s) named above is applying for membership in a Condominium or Homeowner's Association in Southwest Florida. The Board of Directors would appreciate it if you would furnish us with whatever information you consider pertinent regarding the character and stability of the applicant(s).

**Upon completion, please return this form to the APPLICANT. This completed Character Reference Form MUST is sent with the application in order for the Board to approve their purchase or lease. Thank you for your assistance in this matter!**

Very truly yours,  
Raquel Viera

Sales & Lease Administrator

How do you know the applicant(s)? \_\_\_\_\_

For how long have you known the applicant(s)? \_\_\_\_\_

Would the applicant(s) make a good neighbor, in your opinion?  Yes  No

Please describe the applicant(s) character and stability, as you know them:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Reference's Signature

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City, State & Zip: \_\_\_\_\_

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For how long have you known the applicant(s)? \_\_\_\_\_

Would the applicant(s) make a good neighbor, in your opinion?  Yes  No

Please describe the applicant(s) character and stability, as you know them:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Reference's Signature

**FREQUENTLY ASKED QUESTIONS AND ANSWER SHEET**

**The Barrington Club Condominium Association, Inc.**

**As of: April 1, 2014**

**Q. What are my voting rights in the Homeowners Association?**

A. There are 89 units in Barrington Club, a Condominium and the owner or owners of each unit are entitled to one vote on any matters requiring a vote by the unit owners.

**Q. What restrictions exist on my right to use my unit?**

A. A unit may be used only for residential purposed and may not be regularly occupied by more than two persons per bedroom. There are no age limitations. Pets are limited to two dogs or cats or one of each weighing not more than 25 pounds

**Q. What restrictions exist on the leasing of my unit?**

A. Leases must be for periods of not less than 30 days not more than two (2) times per year. The condominium association must receive an application for approval from persons wishing to rent a unit.

**Q. How much are my assessments to the Barrington Club Association for my unit type and when are they due?**

A. Assessments are \$1,385.00 quarterly, payable: April 1, July 1, October 1 and January 1. Fiscal year, 4/1/14 – 3/31/15.

**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. All Unit Owners are Class A members of the Pelican Bay Foundation because of ownership of a unit in the condominium. Each Class A member of the Foundation has one vote for each property unit owned. A condominium unit is one property unit. The current quarterly fees are \$416.00 which includes cable.

**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 Homeowners 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, EXHIBITS HERETO, THE SALES CONTRACT, AND THE HOMEOWNERS ASSOCIATION DOCUMENTS.**