



WELCOME TO OCEAN SANDS CONDOMINIUM ASSOCIATION

Congratulations on your new home at Ocean Sands, one of the most desirable communities to live in. The best way to become familiar with your new community is to visit the Ocean Sands Community website, www.OurOceanSands.com . The website provides you with the wealth of information, including access to information on the private Owners' webpage.

At your convenience, please stop in the Ocean Sands office to introduce yourself. It is nice to meet in person and in addition, I can help with registering your vehicle or providing additional gate fobs and keys. The office is located in Tower 1 on the 2nd floor North end.

Our facility is maintained by 3 full-time maintenance staff. Please introduce yourself if you see them. You will be able to identify them by their blue polo shirts.

We are here to provide assistance and service to our owners and guests of Ocean Sands Condominiums.

Warm regards,

Elaine D'Arcy

Office Administrator

Office Hours: Monday-Friday 10:00am-4:00pm

Office Phone: 727.391.0944

Email: oceansandscondo@outlook.com

Management Company: Ameri-Tech Management
inc. Contact: James Myrthil, LCAM
Office: 727.726.8000



Ocean Sands Condominium Association

Board of Directors Welcome New Owner

Security

- Lobby Codes
- For security, pool gates are auto-locked at night. Hours are posted on the gates.
- Beach & pool -gate security fobs and mailbox keys are provided by sellers at settlement
- Parking registration is required for all vehicles including overnight visitors. Passes are issued in the office during business hours.

Community Life

- Confirm receipt of condo documents, Frequently Asked Questions and Answers, and Rules & Regulations.
- Meet the Board of Directors on OurOceans.Sands.com website (Board of Directors)
- How to find information on the OurOceansSands.com website
- Trash and Recycling (see [Resident Information](#))
- Remind visiting family and tenants to be respectful of our property and courteous to our neighbors:
 - Spigots are available to rinse sand as you come off the beach
 - Location of luggage carts and small carts and importance of reminding guests to promptly return them to the garage
 - Quiet Hours

Ocean Sands Condominiums
14950 Gulf Blvd.
Maderia Beach, FL 33708
Website: www.ouroceansands.com
Email: oceansandscondo@outlook.com



Ocean Sands Condominium Association

Deliveries, Maintenance, and Remodeling

- Notify the Ocean Sands Office in advance of delivery or removal of large items (appliances, furniture, drywall, etc.) so that padding can be installed in the elevator cabs. **(Unit Maintenance Resident information page)**
- When remodeling, please reference the online Remodeling Guide for owner and contractor responsibilities. Pre-approval is needed for some projects. **(See Remodeling Approval Form)**

Health and Safety

- Occupancy limits: **(2 Bedrooms = 6 maximum) (1bedrooms = 4 maximum) (Studio = 2 maximum)**
- The office requests a set of unit keys for emergency access
- Neither propane nor charcoal grills are permitted on unit balconies

Using your Property as a Rental

- A registration fee should be paid in advance to Ocean Sands Office
- The rental term is a minimum of 14 consecutive days
- Guests and tenants are not permitted to bring pets

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Change of Ownership Application

Non-Refundable Transfer Fee.

Please Make \$100.00 Checks payable to: Ocean Sands Condominium Association

oceansandscondo@outlook.com

Tower: _____ Unit: _____ Date: _____ Parking space # _____

Change of Ownership or Lease Information Board Approval is Required

Buyer Name: _____ Buyer Name: _____

Current Address: _____

Main Phone: ____/____/____ Cell Phone: ____/____/____ Email: _____

Employer: _____ Address: _____

Family Information (enter number) Adults: _____ Children: _____

Yes No

Text Alert Notification Cell # Required: ____/____/____

Owners may have 1 pet not to exceed 20lbs. Type: _____ Weight at maturity: _____

Lessees may not have pets.

In case of emergency, notify Name: _____

(2nd Contact Person) Address: _____

Phone: ____/____/____ **Relationship:** _____

Auto 1: Make _____ Year _____ Color _____ L/Plate _____

Auto 2: Make _____ Year _____ Color _____ L/Plate _____

Unit – Will be occupied by me – family full time _____ part time _____

Will you rent your unit short term – Yes _____ No _____ **lease days being 14 consecutive days.**

Approximate date of closing: ____ . **\$100.00 TRNFER FEE CHECK** _____ **DATE:** _____

BACKGROUND INFORMATION FORM **DATE:** _____

I / We _____, prospective
tenant(s) / buyer(s) for the property located at _____

Managed By: _____ Owned By: _____

Hereby allow TENANT CHECK and or the property owner / manager to inquire into my / our credit file, criminal, and rental history as well as any other personal record, to obtain information for use in processing of this application. I / We understand that on my / our credit file it will appear the TENANT CHECK has made an inquiry. I / We cannot claim any invasion of privacy or any other claim that may arise against TENANT CHECK now or in the future.

PLEASE PRINT CLEARLY

<u>INFORMATION</u>	<u>SPOUSE / ROOMMATE</u>
SINGLE _____ MARRIED _____	SINGLE _____ MARRIED _____
SOCIAL SECURITY #: _____	SOCIAL SECURITY #: _____
FULL NAME: _____	FULL NAME: _____
DATE OF BIRTH: _____	DATE OF BIRTH: _____
DRIVER LICENSE #: _____	DRIVER LICENSE #: _____
CURRENT ADDRESS: _____	CURRENT ADDRESS: _____
_____ HOW LONG? _____	_____ HOW LONG? _____
LANDLORD & PHONE _____	LANDLORD & PHONE: _____
_____	_____
PREVIOUS ADDRESS _____	PREVIOUS ADDRESS _____
_____ HOW LONG? _____	_____ HOW LONG? _____
EMPLOYER: _____	EMPLOYER: _____
OCCUPATION: _____	OCCUPATION: _____
GROSS MONTHLY INCOME: _____	GROSS MONTHLY INCOME: _____
LENGTH OF EMPLOYEMENT: _____	LENGTH OF EMPLOYEMENT: _____
WORK PHONE NUMBER: _____	WORK PHONE NUMBER: _____
HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO	HAVE YOU EVER BEEN ARRESTED: (CIRCLE ONE) YES NO
HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO	HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO
SIGNATURE: _____	SIGNATURE: _____
PHONE NUMBER: _____	PHONE NUMBER: _____



Ocean Sands Condominium Association, Inc.

14950 Gulf Blvd, Maderia Beach, Florida 33708

Phone (727) 391-0944

Joint Ownership Voting Designation Certificate Tower 1 ____ Tower 2 ____ Unit _____

To: The Association Board of Directors

In accordance with Article VI, Section 7, Subsection B of the By-Laws, addressing the right to vote, which States:

"Membership may be held in the name of more than one (1) person, corporation or other entity. In the event ownership is in more than one (1) person, corporation or other entity, all of the joint owners shall be entitled collectively to only one (1) vote in the management of the affairs of the Association and said vote may not be divided between multiple owners. All owners shall file a certificate with the Secretary naming the person ("voting member") authorized to cast said Unit vote. A new certificate shall be filed prior to or at any meeting of the members annual or special; if such a certificate is not on file, the vote of such a Unit shall not be considered, nor shall the presence of the said Owners at a meeting be considered in determining whether the quorum requirement has been met.

Print (Enter one name of owner designated as voting member), original.

is hereby designated and appointed to cast the vote of the undersigned on any matter coming before the Association. The undersigned constitute all the owners of the condominium unit above-mentioned.

This certificate shall be valid until revoked by a subsequent certificate.

IN WITNESS WHEREOF, we have hereunto set our hands and seals this:

_____ day of _____, 20_____.

Print Name: _____

Signature: _____



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Consent to Receive Electronic Communications

Save time, save money, save resources

Florida statutes allow electronic transmission of specific condominium association notices and documents only upon written consent of individual members. By completing and returning this **consent to receive electronic documents, the Ocean Sands Board of Directors, or the Association's** current property management company, will send notices and documents to the e-mail address(es) listed below in lieu of postal mail delivery.

Owner's Consent

I agree to receive all communications from the Board of Directors of Ocean Sands Condominium Association, either directly, or on behalf of the Association by the current Property Manager, in Electronic format utilizing the email address(es) provided below. Communications that are required to be provided in hard copy by Florida Statute will continue to be hand-delivered or sent by postal mail.

Tower, unit number(s): _____ Date: _____

Print Name of Owner

email address

Signature

Print Name of Owner

email address

Signature

Return the Consent Form

This signed form (just page 1) may be returned by any of the following means:

- Hand delivered
- Mailed to the Ocean Sands Office using the address in the letterhead
- Scanned and attached to an email to be sent to: oceansandscondo@outlook.com

Please keep a copy for your records.