

# *ORANGE HARBOR*

## **55+ • WATERFRONT • PET FRIENDLY • COOPERATIVE Resident Application Cover Sheet**

**All of the attached pages need to be filed out completely**

1. Disclosure Consent form, authorizing credit and background screens, fee of \$100 **per applicant**, the check must be included with the returned forms.
2. Both pages of the Resident Application form must be filled out completely and returned with Newby Management Application for Residency form.
3. Orange Harbor requires a minimum credit score of 650, for all applicants.
4. Application will not be considered if any required forms are not completed in full, and submitted along with required fees.
5. Please provide a copy of your Driver's License(s) for **each applicant**.



# Residency Application

A 55+ Age Resident Owned Community  
5749 Palm Beach Blvd. • Fort Myers, FL 33905  
239•694•3707

SHARE

RENT

Purchase

DATE: \_\_\_\_\_

YOUR NAME: \_\_\_\_\_

Your Phone #: \_\_\_\_\_

I hereby apply for residency in the community, Orange Harbor Co-op, Inc.

I am interested in  purchasing or  renting this property (address) \_\_\_\_\_

Owned by (current owner name) \_\_\_\_\_

*\*We recommend that you visually inspect the property you wish to purchase IN PERSON prior to purchase. In addition, we strongly recommend the property be professionally inspected by a qualified home inspector.*

Full-time residence

Seasonal residency ( ) months

Investment resale

Full-time rental

Seasonal rental ( ) months

**PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION**

Resident 1. \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email: \_\_\_\_\_

Resident 2. \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email: \_\_\_\_\_

Away Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

\*Pet(s) Yes  No  Dog  Breed \_\_\_\_\_ Other \_\_\_\_\_

\*Registration required (See office)

In order to facilitate consideration of this application, I represent that the following information is factual and true and agree that any falsification or misrepresentation of the facts in this application will result in automatic rejection. I consent to your further inquiry concerning this application.

The documents of Orange Harbor Co-op, Inc. provide an obligation of the unit owners that all units are for *single family residence only*. Orange Harbor is a 55+ resident owned and occupied cooperative community.

*I / we have read, and agree to abide by Governing Documents of Orange Harbor Co-op, Inc.*

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
SIGNATURE



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VEHICLE INFORMATION

Auto Make/Model: \_\_\_\_\_ Color: \_\_\_\_\_ License: \_\_\_\_\_ State: \_\_\_\_\_

Auto Make/Model: \_\_\_\_\_ Color: \_\_\_\_\_ License: \_\_\_\_\_ State: \_\_\_\_\_

HOME WATCH

Person or company caring for your home and/or landscaping while you are away (this is a requirement). You are responsible for the maintenance of your property while you are away.

Does this person have a key to your house?  Yes  No

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

*In case of emergency, notify:*

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

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I acknowledge that I received the **Orange Harbor Co-op Rules and Regulations** and the Prospectus. I agree to abide by the Orange Harbor Rules and Regulations

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

**PLEASE PROVIDE A COPY OF YOUR DRIVER'S LICENSE**

# Disclosure Consent

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239•694•3707

SHARE

RENT

PURCHASE NON-SHARE

Please complete this form for each person to occupy the unit. **Please do not leave any blanks**, as this will result in processing delays of this application. Please submit **\$100 for each applicant**, along with your completed application.

FIRST NAME	MIDDLE	LAST NAME
SOCIAL SECURITY NUMBER:	DATE OF BIRTH:	PHONE:
ANY OTHER NAMES USED:	EMAIL ADDRESS:	
STREET ADDRESS:		
CITY:	STATE:	ZIP CODE:
DRIVER'S LICENSE NUMBER:	EXP. DATE:	DATE ISSUED:

I hereby give consent for an investigative consumer report to be prepared on me, which may include information about me from Law Enforcement Agencies, State Agencies, as well as Public Records information such as credit reports, social security information, criminal history information, motor vehicle records and workers' compensation records, such as are allowed by law and in accordance with the Americans with Disabilities Act.

**PLEASE PROVIDE A COPY OF YOUR DRIVER'S LICENSE**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print: \_\_\_\_\_

Thank you!

Orange Harbor Co-op Management Team

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Please call the office with questions.

239-694-3707

Community Association Manager

Amanda Harling

Assistant Community Manager

Mark Schwab