

**Heritage Oaks at Tradition Homeowners Association, Inc.**  
c/o Bristol Management Services  
543 NW Lake Whitney Place, Suite 101  
Port St. Lucie, FL 34986  
Tel: 772-323-2004 Fax: 772-878-1519

## **Resale Application Instructions**

A Resale is not effective nor may the unit be occupied without the **Prior Approval** by the Board of Directors of the association in the form of a Certificate of Approval. The following items must be completed and/or submitted to the Bristol Management office **PRIOR** to the occupancy of any unit:

- Copy of Sales agreement
- Resale Application to be completed in full
- Acknowledgement of Covenants & Deed Restrictions must be reviewed and signed
- Clubhouse, Pool, and Fitness Room Rules and Hours must be reviewed and initialed
- A Pet Application must be completed and signed if applicable
- Vehicle Information Form (Decals will be issued upon approval)
- Clear copy of current Drivers License and Vehicle Registration
- Waiver of Responsibility
- Application fee of \$150.00. Checks should be made payable to Heritage Oaks at Tradition HOA.

**PRIOR to closing**, the Purchaser must schedule an interview with an Association representative. The purpose of this interview is to review the Association's documents, policies and procedures. Contact Bristol Management at 772-323-2004.

The previous owner should issue a Recreation Center key and/or Gate Opener. If the previous owner does not provide them, there will be a charge of \$40.00 for the first key, \$150.00 for each additional key and \$50 for each gate opener. Only owners may purchase keys or gate openers.

**Note:** All applications must be submitted in full. If not, this will delay the approval process. Applications take a minimum of 15 days and up to 30 days for processing. Please submit your application to us in a timely manner to avoid any delay.

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**Resale Application**

Property address: \_\_\_\_\_

Seller Name: \_\_\_\_\_

Seller phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Estimated closing date: \_\_\_\_\_

Buyer Name: \_\_\_\_\_

Buyer phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Buyer Address: \_\_\_\_\_

Does buyer wish HOA correspondence to be sent to alternate address? \_\_\_\_\_

Alternate address: \_\_\_\_\_

Anticipated Use:

\_\_\_ Year round residents of Heritage Oaks     \_\_\_ Unit will be leased

\_\_\_ Seasonal residents of Heritage Oaks     \_\_\_ Unit will be occupied by relatives

Other \_\_\_\_\_

If a seasonal resident, when will the unit typically be occupied? \_\_\_\_\_

Please list the names and relationship of all persons, other than applicant, who will be residing in the unit:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

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**Acknowledgement of Association  
Covenants & Restrictions**

The undersigned Buyer(s) acknowledge receipt of the Association’s Declaration of Covenants & Restrictions and all amendments thereto recorded in the official records of St. Lucie County, Florida and I/we understand that I/we are moving into a deed restricted community.

The undersigned Buyer(s) agree to abide by the Covenants & Restrictions as well as any other Rules & Regulations adopted by the Association.

The undersigned Buyer(s) understand that failure to comply with the Association’s documents may result in the levy of a fine, possible legal action, and suspension of Recreation Center privileges.

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Co-Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

\_\_\_\_\_  
**For and on behalf of the Board of Directors**

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

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**Clubhouse, Pool, and Fitness Room Rules and Hours**

Report all violations to Bristol Management at 772-323-2004. Please call the Police (911) if anyone has damaged HOA property or is trespassing and has refused to leave after being requested to do so.

- **NO LIFEGUARD ON DUTY – SWIM AT YOUR OWN RISK**
- Pool Hours: Open from **DAWN** until **DUSK**
- Fitness Room Hours: From **6 AM** to **10 PM**
- **You Must Have a Key** to enter Clubhouse, Pool area, & Fitness Room
- Children under 16 must be accompanied & supervised by an adult
- **NO DIVING IN POOL.** No dangerous behavior, horse play or vulgar language on premises. Specifically **NO RUNNING**
- **NO** Smoking or Glassware allowed anywhere in this facility
- **NO** bicycles, skateboards, rip-boards, or similar wheeled items permitted anywhere in this facility. Use the outside bicycle racks provided.
- Alcohol is **only** permitted in the meeting room and only during adult only affairs (21+ years old). **No Alcohol** is permitted anywhere else.
- Food & Beverage is allowed in designated **FOOD AREA** only. No glass permitted. Security Guard has the right to inspect all coolers & bags.
- Only **PLASTIC WATER BOTTLES** are allowed
- Must use pool shower before entering the pool or spa
- Bathing suits required in pool
- Babies must wear appropriate swim diapers when in pool
- No children under 12 years allowed in spa
- No music or radios allowed
- **NUMBER OF GUESTS ALLOWED PER FAMILY IS SIX (6)** unless prior approval is obtained from Management Company or Board of Directors
- Violation of these **RULES** and **HOURS** may result in suspension of all pool, clubhouse, and/or fitness room privileges. Any damage to HOA property shall result in a suspension of all privileges and/or fine. (see HOA documents – Article VIII, General Restrictive Covenants – Section 19 – Leasing: Owners are responsible for damages caused to common areas by their guests or tenants)
- All rules and regulations per Florida Statute Chapter 64E-9 Public Swimming Pools and Bathing Places apply

Board of Directors  
Heritage Oaks at Tradition Homeowners Association, Inc.

**Applicant Initials** \_\_\_\_\_ **Co-Applicant Initials** \_\_\_\_\_

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**Application for Pet Approval**

Applicants Name \_\_\_\_\_

**Pet #1** – Type \_\_\_\_\_

Breed \_\_\_\_\_

Pet's Name \_\_\_\_\_

Weight \_\_\_\_\_ Height \_\_\_\_\_ Age \_\_\_\_\_

**Pet #2** – Type \_\_\_\_\_

Breed \_\_\_\_\_

Pet's Name \_\_\_\_\_

Weight \_\_\_\_\_ Height \_\_\_\_\_ Age \_\_\_\_\_

Applicant understands and agrees that the keeping of pets on the premises is a privilege and not a right and may be revoked by the Association upon written notice. Those pets which in the sole discretion of the association endanger the health, make objectionable noise, are aggressive in nature, or constitute a nuisance or inconvenience to the Owners of other Units or the Owner of any property located adjacent to the properties may be expelled and removed from the properties by the Board. Pit bull or pit bull mixes are not allowed. Pets are not permitted in the Clubhouse, Gym, or Pool area. Dogs shall be confined to a leash whenever they are outside a Unit. No more than two (2) pets may be kept. It shall be the pet owners obligation to remove the pet's waste material from all property maintained by the association. **A photograph of all pets described above must be provided.** All domestic pets must be licensed and have rabies vaccinations per Port Saint Lucie Code. Within thirty (30) days of occupying the premises the applicant must provide written proof to the association that pet has a license and rabies vaccination.

**I agree to abide by the association's covenants regarding pets and the Port Saint Lucie Code regarding animals (see attached).**

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Co-Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Picture(s) attached?** Yes \_\_\_\_ No \_\_\_\_

## Port Saint Lucie Animal Control Violations & Citations

Animal Control Officers may issue citations to citizens who violate city Animal Control ordinances. The citations are issued for civil, not criminal, infractions. Currently, the citation amounts are as follows:

First offense \$50

Second Offense \$100

Third offense \$200 plus mandatory court appearance

### **Animals at Large—92.03 (A) (1)**

All owned animals must be properly restrained at all times. Animals captured running loose are transported to the Animal Control holding facility for the owner to pick up. An impound fee of \$25 is charged for each animal picked up, and \$10 for each night the animal remains unclaimed. If the owner fails to pick up the animal, it is transported to the St. Lucie County Humane Society (772) 461-0687 or the Humane Society of the Treasure Coast at (772) 223-8822.

### **Noisy Animals Prohibited—92.09**

It shall be unlawful for any person to keep, harbor, own, or maintain any animal which causes a noise disturbance by barking, yelping, howling, screeching, squawking, chirping, cawing, crowing or whistling between the hours of 11 p.m. and 6 a.m. Additionally, the animal may not bark, yelp, howl, screech, squawk, chirp, caw, crow, or whistle for continuous periods of five minutes or more at any other time of the day.

### **Animal Licensing—92.40**

All domestic pets over the age of 6 months old must have a City of Port St. Lucie animal license displayed on their collar. The cost for a license is \$5 for an altered animal (spay or neutered), or \$15 for an unaltered animal. Proof of current rabies vaccination from a licensed veterinarian is required, and licenses may be obtained from most Port St Lucie veterinarians, and at the Animal Control Department 1133 S.W. Macedo Blvd., or by mail.

### **Removal of Animal Defecation—92.16**

It is unlawful for any person to allow an animal to defecate upon private property not owned by the person or upon public property, including but not limited to sidewalks and swales, without removing the defecation. This shall not apply to physically challenged persons or if the owner has the consent of the property owner in question.

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**Vehicle Information**

Date: \_\_\_\_\_ Property Address: \_\_\_\_\_

Name: \_\_\_\_\_

(both applicant & spouse)

Present Address: \_\_\_\_\_

(Street, City, St & Zip)

**Vehicle #1**

**Vehicle #2**

Make: \_\_\_\_\_

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Year: \_\_\_\_\_

Color: \_\_\_\_\_

Color: \_\_\_\_\_

Vin#: \_\_\_\_\_

Vin#: \_\_\_\_\_

Tag#: \_\_\_\_\_

Tag#: \_\_\_\_\_

State: \_\_\_\_\_

State: \_\_\_\_\_

Decal: \_\_\_\_\_

Decal: \_\_\_\_\_

Vehicles are registered to:

\_\_\_\_\_

\_\_\_\_\_

\*Please be sure to list **all** vehicles at the property. Additional copies of this form are available upon request.

**Please note: All information on this form must be completed. A picture must be provided if the vehicle is a truck.**

Any changes in use or appearance of the above described vehicle(s) must be submitted to the board of directors with a new application.

It is clearly understood that all vehicles must be parked in the driveways and/or garages. Parking in the streets, on the grass, or on sidewalks is not permitted. This is enforced by towing solely at the owners expense. No commercial vehicles, campers, mobile homes, motor homes, boats, house trailers, boat trailers, or trailers of every other description shall be permitted to be parked or to be stored at any place on any lot, except that they may be stored within enclosed garages. All vehicles must prominently display a decal issued by the association.

See Article VIII – General Restrictive Covenants - section 12 for more information.

**I agree to abide by the association’s covenants, rules, and regulations relating to vehicles in the community.**

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Co-Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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**Waiver of Responsibility**

I, \_\_\_\_\_, whose Tradition property address is \_\_\_\_\_, do hereby acknowledge that the installation of a satellite dish affixed to the Unit may cause damage to the exterior finish of the Unit. If damages occur, or if dish is removed in the future, I will make the repairs at my sole expense. I understand my failure to do so could potentially be the cause damage to my property. I further acknowledge that the Association is not responsible and shall not be held liable for any damages or any necessary repairs resulting from the installation or removal of a satellite dish on my unit.

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Co-Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_