

NAME OLD PORT COVE - COVE TOWER EAST & WEST Condo Homeowner Assn
 Property Address 115 AND 123 LAKESHORE DRIVE
 Mailing Address MMI OF THE PALM BEACHES: 1201 US HWY ONE, SUITE 330, NORTH PALM BEACH, FL 33408
 Total # of Units 86/85 # of Bldgs 2 # of Units per Bldg 86/85 # of Floors 22 Elevator? YES
 Security? YES Security/Access Phone # _____ Annual Meeting Date MARCH
 Fees \$ VARY Per UNIT Other Fees POA
 Fees Cover: Bldg Ins Cable CAM Roof Paint Garbage Water
 Security Sewer Pest Control Reserves Other _____
 HO Insurance Carrier BROWN & BROWN, INC Phone _____
 Rec. Facilities: Tennis Pool Clubhouse Golf Boating Other _____
 Add'l fee for use of facilities? NO If so, how much \$ _____ per _____
 Claim Adult housing status? Yes No Pets permitted? Y N Weight _____ No. _____
 Vehicle or other restrictions TRUCKS, PICK-UPS, REC. VEHICLES, ETC.

Parking spaces per unit: 1 Open Covered Garage _____
 Yard sign permitted? Yes No Type _____ Size _____

| | <u>BUYERS</u> | | <u>TENANTS</u> | |
|---|---|-----------------------------|---|-----------------------------|
| Prospects need approval? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Personal interview required? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Fee involved in approval? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | | \$ <u>150.00</u> | | \$ <u>150.00</u> |
| Paid to whom? <u>COVE TOWERS CONDO ASSOC.</u> | How long does it take for approval? <u>15-30 DAYS</u> | | | |
| Capital Contribution (Buyer) Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Amt. _____ | Common Area Security Deposit (Tenants) Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Amt. _____ | | | |
| Any time requirements on lease? <u>MIN: 3 months</u> | <u>MAX: 12 months</u> | | <u>Times per year? 1</u> | |
| Person to contact for application forms <u>MMI OF THE PALM BEACHES</u> | Phone <u>561-686-7818</u> | | Title/Position _____ | |

Application available online: NO

| | | |
|---|---------------------|---------------------|
| Property Management Co <u>MMI OF THE PALM BEACHES</u> | <u>561-686-7818</u> | <u>561-686-7284</u> |
| Name | Phone | Fax |
| and/or | | |
| Individual Contact <u>CATHIE CARR</u> | <u>561-686-7818</u> | <u>561-686-7284</u> |
| Name | Phone | Fax |

Remarks: _____

| | | | |
|---|----------------|---------------------|--------------|
| This information supplied by <u>CATHIE CARR</u> | <u>VP</u> | <u>561-686-7818</u> | <u>03/12</u> |
| Name | Title/Position | Phone | Date |

Association email: ccarr@miamimangement.com Association website: NONE

WARNING: Please see Important Statement In Front of Book