



# Parks Edge

PROPERTY OWNERS' ASSN., INC.

3201 SW Landale Blvd.  
Port St. Lucie, FL 34953

Phone: 772.336.1525  
Fax: 772.336.3605  
[www.ParksEdge.org](http://www.ParksEdge.org)  
[ParksEdgePOA@gmail.com](mailto:ParksEdgePOA@gmail.com)

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## WELCOME TO THE COMMUNITY OF PARKS EDGE

We are pleased that you have chosen to buy within our community. You have received a copy of the By-laws, rules and Regulations and other helpful information inside your packet. Please take time to review the material.

Also, a warranty deed is supplied to you at closing. If you have yet to supply Parks Edge with a copy, please do so at your earliest convenience. We require a copy in order for us to keep accurate records.

We try to keep an active and involved community. If you stop by the clubhouse at the beginning of each month, you will find the latest calendar of events, or you may check out our website at [www.ParksEdge.org](http://www.ParksEdge.org) for up to date information. We have ongoing community functions of which we would love for you to be a part of. If you have any suggestions, please give us a call.

We appreciate your cooperation in compliance of the procedures of our Association. If you have any questions or concerns, please feel free to call our office at 772-336-1525 or leave a message and the office administrator will return your call as soon as possible. Our office is open Monday thru Thursday 9:00 a.m. to 2:00 p.m. and the second Saturday of each month from 9:00 a.m. to 1:00 p.m.

Sincerely,

Board of Directors

Parks Edge Property Owners' Association

PARKS EDGE PROPERTY OWNERS' ASSOCIATION, INC.

**OWNER/RESIDENT REGISTRATION**

**Please Note: A copy of the contract or deed, as applicable, must be provided in order to obtain your Homeowner Certificate and related governing document.**

Street Address of Parks Edge Property

Print Owner/Purchaser Name Phone # 1 phone # 2 Email address

Print owner/Purchaser Name Phone # 1 phone # 2 Email address

Print Owner/Purchaser Mailing Address City, State, Zip

Drivers' License/ID # State Issued Exp Date SSN

Is this property purchased for Owner of Tenant Occupancy? Owner \_\_\_\_\_ Tenant \_\_\_\_\_

**All prospective tenants must submit an application to Parks Edge Property Owners' Association, Inc. PRIOR to occupancy for Board approval.**

Is this property Bank owned as the result of a foreclosure, deed in lieu or other default? Yes \_\_\_ No \_\_\_

Contract Date Closing Date

Property Management Company or Owner Rep Phone Number

Contact Person Address Email Address

I/We, as Owners, authorize the above-referenced Management company or owner representative To act on our behalf in all matters related to compliance with the Association \_\_\_\_\_ Owners' Initials

Vehicle Information				
Make	Model	year	color	Tag #

PARKS EDGE PROPERTY OWNERS' ASSOCIATION, INC.

**PET REGISTRATION FORM**

Pet Information				
Type	Color	Weight	Breed	License#
Veterinarian's Name & Phone Number (Please provide current vaccination record)				

**In accordance with C&R's page 10, section 7, I've read and agree to abide by the following pet regulations:**

**Read and initial each:**

\_\_\_\_\_ No animals, livestock or poultry of any kind shall be raised, bred or kept on any lot except that dogs, cats or domestic pets may be kept, provided that they are not kept, bred or maintained for any commercial purposes.

\_\_\_\_\_ Animals and pets shall be restricted to the following: dogs, cats, fish, domestic birds, hamsters, lizards, gerbils, turtles. Domestic birds shall not include poultry of any kind. A maximum of two (2) dogs and (2) cats will be permitted. **The foregoing shall also apply to animals/pets which visit the Properties.**

\_\_\_\_\_ **All dogs and cats must be inoculated against rabies** by a duly qualified and licensed veterinarian. Pets shall also be inoculated in like manner in such cases of emergency whenever ordered by the Board of Health of the State of Florida.

\_\_\_\_\_ When outside of the residence, all dogs and cats must be accompanied by an attendant who shall have such dog/cat firmly held by the collar and leash, which leash shall not exceed eight (8) feet in length. No cats or dogs shall be permitted to run at large outside of the residence; this shall not prohibit a cat or dog from being maintained without a leash or other restraint within any enclosed privacy area of the residence in which the dog or cat resides and/or is maintained.

\_\_\_\_\_ The owner/custodian of each animal or pet and/or the individual walking same, shall be required to clean up after the pet/animal.

\_\_\_\_\_ If a dog or any other animal becomes obnoxious to other owners by barking or otherwise, the pet owner shall remedy the problem, or upon written notice from the Association, he or she shall be required to dispose of the pet.

\_\_\_\_\_ The pet/animal owner and the owner of the residence involved shall be strictly liable for damages caused to the Properties by the pet/animal.

\_\_\_\_\_ Any animal/pet owner's right to have an animal/pet reside in or visit the Properties shall have such right revoked if the animal/pet shall create a nuisance or shall become a nuisance.



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**As a prospective Homeowner of a property within the Parks Edge Property Owners' Association, Inc., I/We understand the following:**

- a) That I have met with the Parks Edge Orientation committee or an official representative of Parks Edge Property Owners' Association. I have received a copy of the Governing Documents and Rules and Regulations, fully understand the documents, and will abide by them according to Parks Edge Property Owners' Association, Inc. (POA).
- b) I understand that if the Governing Documents or Rules and Regulations are violated I may be subject to suspension of the use of POA facilities and/or may be fined up to \$25.00 per day (up to \$1000.00).
- c) I understand that if we want to rent the property we are required to notify the POA office. All prospective tenants must fill out an application. **The applicant and homeowner are responsible to have the application, fees and supporting materials submitted to Parks Edge Property Owners' Association, Inc. PRIOR to occupancy for Board approval.** If a Realtor and /or Property Manager is retained to supervise the property, I understand that we are required to notify the POA office with the address and telephone number of the individual or company responsible for supervising the property.
- d) I understand that we are responsible for all members of the family and guests when utilizing the facilities of the POA.
- e) I understand that we must provide, in writing, authorization for any tenant to use the facilities of the POA. I understand in doing so we only retain the right to vote and would have to be a guest to use the facilities.
- f) I have read the pet restrictions listed in the Covenants & Restrictions of the Association and understand that any pets residing on the property must be current on all vaccinations and registered with the Associations.
- g) All owners recorded on the property deed must sign and acknowledge responsibility in accordance with the POA Governing Documents and Rules and Regulations.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**Parks Edge Property Owners' Association, Inc.**

**POOL KEY CARD**

**Pool key cards** are provided to Owners for a non-refundable \$50 fee. Residents may waive their right to a pool key card if they choose. Owners may delegate the use of common properties to their registered tenant(s).

Property Address \_\_\_\_\_

Initial

Pool key card Number \_\_\_\_\_ has been assigned to this property for the owners use.

No pool key card has been assigned to this property and the Owner waives the right to the use of this amenity.

No pool key card has been assigned to this property at the time of Owner registration;

A pool key may be requested by subsequent registered Tenant in the property.

In accordance with the Covenants and Restrictions, Article 1X, Section 11(e), my (our) signature(s) below approve the delegation of use and enjoyment in the common properties to the authorized Tenants of this property. This delegation remains effective until rescinded in writing to the office of the Parks Edge Property Owner's Association office.

\_\_\_\_\_  
Owner Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date





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## ISSUED POOL KEY /RECEIPT FORM

Print Owner's Name	Home Phone No.	Work Phone No.	Cell Phone
Property Address			
Alternate Mailing Address		City, State	Zip
Driver's License #	State	Expiration Date	Social Security #
Key Card#	Activated Date	Owner Initial	

The following names will be admitted to the pool facilities with key card #

Name of persons using facilities	Date of Birth
-----	-----
-----	-----
-----	-----
-----	-----
-----	-----

Owner acknowledges that the first pool card is a \$50.00 non-refundable fee. Replacement cards may also be issued for an additional \$50.00 non-refundable fee.

**Notify the office immediately if your key card is lost or stolen. Damages or other maintenance fees will be borne by the owner assigned to the key card of the individual found to be responsible. Protect your key card!**

Owner and guests acknowledge responsibility to abide by all current rules and regulation.

Signature	Date	Signature	Date
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**THERE ARE NO LIFEGUARDS AT THE PARKS EDGE POA POOL AREA.**

To operate the key system:

1. Pass key card over the reader at entryway
2. Gate automatically closes behind you
3. Once entering the pool area you are under video surveillance
4. To exit, pass the key card over reader again
5. In case of emergency, press the red button to exit

All pool rules apply. Individuals who choose not to follow the rules may have their privileges suspended and/or revoked according to pool rules. Owners and tenants are responsible for the actions and behavior of their guests, including suspensions, fines and restitution for damages, if Necessary.

**VIDEO SURVEILLANCE IS REVIEWED DAILY**





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**(SALES ONLY)**

## VOTING CERTIFICATE

**Parks Edge Property Owners Association, Inc.**

**Know all men by these present, that the undersigned is the record owner (s) in Parks Edge Property Owners Association, Inc. shown below, and hereby constitutes, appoints and Designates:**

-----  
**(Insert one owners name above)**

**As the voting representative for the Homeowners Association unit owned by said undersigned pursuant to the by-laws of the Association.**

**The aforementioned voting representative is hereby authorized and empowered to act in the capacity herein set forth until such time as the undersigned otherwise modifies or evokes the authority set forth in this voting certificate.**

**Dated this \_\_\_\_\_ Day of \_\_\_\_\_, 20 \_\_\_\_.**

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

**(Unit owner's signature - If jointly-owned, both owners' signatures required)**

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

**Property Address** \_\_\_\_\_

**Port St. Lucie, FL 34953**

**When there is a corporation or partnership as owners of the property, then a voting representative must be appointed by the corporation or partnership and becomes the representative. All owners must sign this form to acknowledge this appointment.**