

**Authorization Form  
for Pine Run Directory/E-Mails**

- According to Florida state regulations if you wish not to be included in the official association directory distributed to all residents, you must inform the association by checking the box below. ***Please print clearly.***

**Do not include my information.**

Name: \_\_\_\_\_ Unit #: \_\_\_\_\_

- If you are a new owner and you wish to be included in the association directory and e-mail lists, check the box below.
- If you have changes in your information and you want the new information to be included in the association directory and email list check the box below.

**New Owner/Changes**  
**For new owners and owners with information to update. *Please print clearly.***

Name(s): \_\_\_\_\_ Unit #: \_\_\_\_\_

Official Mailing Address: \_\_\_\_\_

Alternate Mailing Address: \_\_\_\_\_

Cell #1 \_\_\_\_\_ Cell #2 \_\_\_\_\_ Landline# \_\_\_\_\_

E-mail: \_\_\_\_\_ E-mail: \_\_\_\_\_

- If you wish to be included in the Pine Run email list for official and social news, notices and newsletter  
 **Yes, include my (our) emails on the list.**

**I (we) agree that the above information is what we do (or do not) want included in the Directory/Email List.**

Signature: \_\_\_\_\_ Unit #: \_\_\_\_\_

Signature: \_\_\_\_\_ Unit #: \_\_\_\_\_

**Send to:**

**Pine Run Association, c/o Keys-Caldwell, Inc., 1162 Indian Hills Blvd., Venice, FL 34293**

## COMPLIANCE AND DEFAULT PROCEDURE

### FIRST NOTICE

Upon notification of a violation by a Pine Run owner, the Board of Directors or its management company shall issue a letter outlining the violation and requesting the owner to respond within 14 days with regard to correcting the situation.

### SECOND NOTICE

If the owner does not respond and the violation is not corrected, or if the violation recurs at any time, a second letter will be sent by the Board of Directors or its management company, stating that failure to respond within 14 days will result in a fine or suspension of privileges being levied after an opportunity of a hearing with the Compliance Committee.

### NOTICE OF HEARING

If the owner does not respond and the violation is not corrected within the second 14-day deadline, or recurs at any time, the Board shall levy a fine and/or suspension of use of facilities, and call for a hearing with the Compliance Committee to take place within 14 days.

If the owner provides evidence to the Board of Directors that the violation has been corrected and/or assurance that it will not recur, the Board may choose not to levy a fine or suspension. Should the violation recur, the hearing may be called again with 14 days' notice.

### THE HEARING

The hearing will be held 14 days after the second warning's deadline for correction, or at any time the violation recurs. Dates and times will be set by the Compliance Committee. If there are extenuating circumstances, reasonable accommodation will be made. At least three (3) Compliance Committee members must be present either in person or by telephone, as needed.

The Compliance Committee will review evidence presented by the Association and by the unit owner. The role of the Compliance Committee is to determine whether to confirm or reject the fines or suspension levied by the Board. The Committee must provide a written report to the Board which will notify the owner of the results.

**SUSPENSIONS, FINES OR OTHER REMEDIES** It is the Board of Directors' responsibility to collect the fines, impose the suspensions, or otherwise handle the situation from then forward in accordance with the steps outlined in the Association's Declarations of Condominium.

## GUIDELINES FOR MODIFICATIONS APPROVAL

1. Any modifications including additions, alterations, remodeling and/or replacements inside or outside the units must be approved by the Board of Directors, as noted below.
2. Unit owners may fill out and submit an online Application for an Architectural/Grounds Modification (A/GM) at <https://kcl.cincwebaxis.com/> (after logging into your account, click on "ARC Requests" on the top left of the screen -- "ARC/ACC" is Keys-Caldwell terminology for our "A/GM") or use our application (*Form 3A, Application for Architectural/Grounds Modification*). The request should be submitted well in advance of any type of interior work involving structural changes, plumbing, electrical work, HVAC work or replacement of flooring on a 2nd floor unit to ensure compliance with codes and for written approval by the Board of Directors.
3. Approval must be obtained for any exterior work to be done anywhere on the common elements or limited common elements.
4. If a proposed modification will affect the exterior of the building or the common elements, the permission of all adjacent or affected owners of units in that building must be obtained. The owner applying for the modification must obtain signatures from such owners and submit the form with the A/GM (*Form 3B, Adjacent/Affected Owners' Permission for A/GM*). Approval will not be granted without all signatures.
5. Approved work must start within 60 days from the date of Board approval. Approval will expire after 60 days.
6. Any work which is started without Association approval or notification will result in a fine of \$100 per day, not to exceed a total of \$1,000.00.
7. If emergency work is necessary, work may commence upon notification of any Board officer or the management company. This does not relieve the owners of their obligation to send written notice to the Board no later than seven (7) calendar days from the date of the emergency work performed.

(Form 3A)

## APPLICATION FOR ARCHITECTURAL/GROUNDS MODIFICATION

OWNER: \_\_\_\_\_ UNIT #: \_\_\_\_\_ PHONE #: \_\_\_\_\_

The unit owner assumes full responsibility for the maintenance of the modifications herein described and holds the Association harmless from any liability or damage to the subject property, contiguous property, or community common property as a result of this modification. All work will be done at the owner's expense. This request is subject to obtaining *all required county and state permits*. Any damage caused by this modification to sidewalks, roadways, irrigation systems, utility and cable TV facilities will be restored at the owner's expense. The project must begin within 60 days of Board approval.

The owner shall notify the Board of Directors, in writing, upon completion of the modification. *The Board reserves the right to inspect the completed project to determine compliance with this request.*

Approval is hereby requested to make the following modifications, alterations or additions as described and depicted below and/or on additional attached pages. Please include a full description of the modification including dimensions, materials, color, design, locations and any other data.

***No work or modification will begin prior to approval of this request.***

Owner's Signature \_\_\_\_\_ Date: \_\_\_\_\_

***For Board of Directors Use Only***

Date Received by Board Member: \_\_\_\_\_

Approved     Disapproved     Owner Notified

\_\_\_\_\_  
Architectural Chair

\_\_\_\_\_  
President

\_\_\_\_\_  
Date

**RETURN APPLICATION IN TRIPLICATE to the Board of Directors of Pine Run Condominium Association to be acted upon at the next regularly scheduled Board Meeting.**

**(Form 3A)**

(form 3B)

**ADJACENT/AFFECTED OWNERS' PERMISSION FOR A/GM**

If the proposed modification will affect the exterior of the building or anywhere in the common element, the permission of all adjacent and affected owners of units must be obtained. In that case, this completed form must be attached to the A/GM application. Failure to obtain permission from all adjacent or affected owners will result in denial for the modification.

I, the undersigned, as an owner adjacent to or affected by the proposed modification, fully understand the proposed modification and its effect, and hereby grant my permission for the modification to occur.

Unit # Bldg #	Owner Name (Printed)	Owner Signature	Date

As the owner requesting the modification, I hereby attest that I have fully explained the modification to each of the above owners and obtained the signatures with coercion or misrepresentation.

\_\_\_\_\_  
Requesting Owner's Signature  
(form 3B)

\_\_\_\_\_  
Date

## PEST CONTROL WAIVER REQUIREMENTS

Florida is rife with insects and other pests which, left uncontrolled, can create health and material damage to residents and units. The beauty of our natural landscaping is attractive to pests of all kinds and infestations can move quickly from outside to inside and from unit to unit. To protect ourselves and our property, the Pine Run Association contracts with a licensed pest control service to treat all units on a scheduled basis.

Owners who have concerns or reservations about pest control and would like to learn more about it are encouraged to speak with NaturZone Pest Control, phone number 941-378-3334.

If an owner wishes to opt out of the service altogether, or select an alternative pest control service, they may do so by signing the Pest Control Waiver *Form 4A*, *PEST CONTROL WAIVER* and send it to: Pine Run Association, c/o Keys-Caldwell, Inc., 1162 Indian Hills Blvd., Venice, FL, 34293; telephone is 941-408-8293.

Email: [kcweb@keys-caldwell.com](mailto:kcweb@keys-caldwell.com)

## PEST CONTROL WAIVER

Choose one:

I have declined the Association's scheduled pest control and will have no pest control service. I understand that if this lack of pest control creates an Association pest control issue or results in damage to the common elements, limited common elements or to my own unit, I am totally responsible for all costs related to any corrective measures necessary.

I have declined the Association's scheduled pest control and have contracted with an alternative pest control service. I understand that if this alternative service creates an Association pest control issue or results in damage to the common elements, limited common elements or to my own unit, I am totally responsible for all costs related to any corrective measures necessary.

Name of Service:

\_\_\_\_\_

Schedule of Service:

\_\_\_\_\_

Owner's Name: \_\_\_\_\_ Unit#: \_\_\_\_\_

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

Send to: Pine Run Association  
c/o Keys-Caldwell, Inc., 1162 Indian Hills Blvd., Venice, FL 34293  
Phone 941-408-8293 Email: [kcweb@keys-caldwell.com](mailto:kcweb@keys-caldwell.com)





**10. Turn off water at main valve inside your unit.**

**11. Leave air conditioner on and set to 80 degrees F and Humidistat at 60% to prevent humidity and mold. Make sure air conditioner has been serviced properly before leaving.**

**12. If refrigerator is left on, turn ice maker off.**

**13. Remove any outside items that could become flying debris in high winds, including furniture, pots, and outside decorations. Remove furniture from lanais and porches.**

**14. Unplug all unnecessary appliances to prevent lightning strikes.**

**15. Turn off hot water heater.**

16. If you leave a car, run heater for 15 minutes after using AC for last time to dry moisture in air ducts. To avoid a dead battery when leaving a car for 4-5 months, disconnect wire leading to negative pole.

**17. Leave a set of car keys in the unit on the kitchen counter in case the car has to be moved in an emergency or during roadway/building maintenance. If you have a locked carport storage closet, leave that key as well.**

## SARASOTA COUNTY RECYCLING

Do not put your recyclables in a plastic bag and put it in the bin. Plastic bags are not recyclable. Recyclables should be put in the bin without being bagged. Recyclables must be rinsed out. Separate the containers and the caps.

#6 plastic (styrofoam and similar) cannot be recycled. Do not put #6 plastic in the bin. Styrofoam and plastic bags may be recycled at your local grocery store.

Sarasota Single-Stream Recycling - Blue Bins

**RECYCLES** **ITEMS TO RECYCLE**

CANS	CARTONS	GLASS	PAPER	PLASTICS
Aluminum and Steel Cans Empty and rinse.	Food and Beverage Cartons Empty, rinse and replace cap.	Bottles and Jars Empty, rinse and replace cap.	Mixed Paper, Paper Board, Newspaper and Magazines Flatten cardboard and boxes.	Kitchen, Laundry, Bath Bottles and Containers Empty, rinse and replace cap.

**WHEN IN DOUBT, LEAVE IT OUT!**

NO Recyclables in Plastic Bags Empty loose recyclables in carts.	NO Plastic Bags Return to retail.	NO Food and Liquids Compost if possible, or throw in trash.	NO Tanglers Wires and hoses can damage equipment! Throw in trash.	NO Diapers Throw in trash.	NO Hazardous Waste Take to the county's chemical collection center.

**Follow the 3 foot rule!**

Keep carts at least 3 feet away from other carts, mailboxes, fire hydrants, low hanging trees or shrubs, parked cars and utility poles so trucks can easily access cart.

POINT THIS ARROW TOWARD THE STREET

**THE RECYCLING PARTNERSHIP**  
Funded in part by The Recycling Partnership.

Sarasota County  
For more information, go to [scgov.net](http://scgov.net) or call 941-861-5000.

Created by Sarasota County Commissioners 6/14/2014

Some interesting facts from earthfriends.com

- One recycled glass bottle saves enough energy to power a personal computer for 25 minutes
- 70% less energy is utilized to recycle paper compared to making it from raw materials

One recycled tin can saves enough energy to power a television for 3 hours

- Up to 24 trees are cut down to make one ton of paper
- Glass products in landfills do not decompose at all.

## SALES APPLICATION RULES AND GUIDELINES

### BOARD OF DIRECTORS' APPROVAL:

Any condominium that is to be sold by an owner shall be considered for approval by the Board of Directors following receipt of the sale application by the Association's management company and review by the Board. Board action shall be conveyed to the owner in writing with a copy to the prospective buyer.

- Pine Run Association does not permit private mortgage holders.
- Carports are appurtenances to the parent condominium unit and are included in the sale
- Pine Run limit of two pets (dogs, cats); rule #15 lists prohibited dog breeds.
- Buyers will have a maximum of 2 parking spaces -- one assigned and one unassigned.

### APPLICATION PROCEDURE:

Upon receipt of the sales contract offered by the buyer, the owner/seller shall complete the sale application. The owner/seller shall schedule the settlement date at least 30 days in the future for the Association's processing of the sale transaction.

The sale application is at <https://kcl.cincwebaxis.com/cinc/documents/> or at *Appendix 7, Form 7A*. The completed application shall be delivered to: Pine Run Association, c/o Keys-Caldwell, 1162 Indian Hills Blvd., Venice, FL 34293 (telephone: 941-408-8293).

### COMPLETE SALE APPLICATION PACKAGE:

Must contain the following:

- clear, accurate, legible printed information
- photo ID(s) of the buyer(s)
- a non-refundable fee of \$50 payable to "Pine Run Association"

**OR**

a non-refundable "rush transaction fee" of \$100.00 if the application is received by the management company less than 10 days prior to the proposed occupancy date.

The owner should retain a copy of the completed sale application.

If the management company incurs costs for a preparation of any legal documents, additional fees may be required.

Only complete and legible applications shall be accepted for review by the management company and the Association.

The Association's management company will not issue an estoppel letter to the settlement officer unless and until the Association has approved the sale transaction.

## APPLICATION FOR SALE OF UNIT

Sale of Unit #: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Proposed Date of Settlement: \_\_\_\_\_

### **OWNER INFORMATION - *Please print clearly***

Name(s):

\_\_\_\_\_

Corporate Name (if any):

\_\_\_\_\_

Home Address:

\_\_\_\_\_

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

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

As owner(s), I (we) have provided the buyer with all required legal and regulatory documents and so attest by my (our) signature(s) below. I have also notified the buyer of required participation in an information session prior to settlement.

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

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

## APPLICATION FOR SALE OF UNIT

Sale of Unit #: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Proposed Date of Settlement: \_\_\_\_\_

### BUYER INFORMATION - *Please print clearly*

Name(s):

\_\_\_\_\_

Home Address:

\_\_\_\_\_

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

\_\_\_\_\_

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

Emergency Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

Car License #: \_\_\_\_\_ State: \_\_\_\_\_

### MORTGAGE HOLDER INFORMATION:

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

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

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

I agree to participate in an information session with an association representative.

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

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

## LEASE APPLICATION RULES AND GUIDELINES

### BOARD OF DIRECTORS' APPROVALS:

All leases and lease extensions must be pre-approved by the Board of Directors.

Occupancy

and use of property is not permitted prior to lease application approval by the Board. Continued occupancy beyond a 12-month lease period requires Board approval for each lease extension period thereafter.

No lease will be approved if a penalty fee levied against a condominium unit is unpaid, or if the owner is more than 90 days in arrears for payment of Association obligations, unless specifically approved by the Board of Directors.

### LEASE RESTRICTIONS:

Leases are for a minimum period of one (1) month and are not to exceed one (1) year of single occupancy.

If an occupancy is desired beyond the single year, Board approval must be obtained for the lease extension. The lease extension period shall be for a minimum of 30 days and a maximum of 1 year.

Only four separate rentals are permitted in a 12-month period.

### APPLICATION PROCEDURE:

A lease application is to be completed by the owner and sent to the Association's management company for review at least 10 days prior to intended occupancy date. Subsequently, the application will be reviewed by the Board, followed by written notification to the owner of lease approval or the need for other action.

The lease application is at *Appendix 8, Form 8A*, or available on the Association's website at <http://kcl.cincwebaxis.com>

The completed application shall be delivered to the Association's management company: Pine Run Association, c/o Keys-Caldwell, 1162 Indian Hills Blvd, Venice, FL 34293; 941-408-8293

### COMPLETE LEASE APPLICATION PACKAGE

The complete lease application package must contain the following:

- clear, accurate, legible printed information
- photo ID(s) of the adult tenants.
- a non-refundable transaction fee of \$50.00 made payable to "Pine Run Association".

#### **OR**

a non-refundable "rush transaction fee" of \$100.00 if the application is received by the management company less than 10 days prior to the proposed occupancy date.

The owner should retain a copy of the completed lease application.

## APPENDIX 8

## EXTENDED LEASE

If an owner decides to extend a current lease beyond its expiration date, an application must be submitted at least 10 days prior to the current lease expiration date. The lease extension period shall be for a minimum of 30 days and a maximum of 1 year. A transaction fee is waived for renewals with no lapse in occupancy, and no photo ID is required. However, a "rush fee" would apply. If occupancy continues beyond the lease expiration date without an approved extension, the Owner is subject to a \$25/per day penalty fee.

## OWNER AND TENANTS' RESPONSIBILITIES

The owner shall inform the prospective tenant that an information session is to be scheduled with an association representative.

The owner may require prospective tenants to have "renter's insurance" for any damage to the property or the Pine Run common elements of the community.

The owner shall notify the management company if an agent is involved in the transaction so entry arrangements can be made to show the property.

The owner retains responsibility for screening, exercising oversight, and for the conduct of their tenants.

The tenant does not have the right to assign or sublease the unit, or to lend the unit to another person.

The owner shall not occupy the unit at the same time as the renter. The maximum of two parking spaces limit is in effect for leases; if the absentee owner has a vehicle occupying a space, the tenant is limited to one space.

**APPLICATION FOR LEASE OF UNIT**

Lease of Unit #: \_\_\_\_\_ Date of Application: \_\_\_\_\_

**OWNER INFORMATION - *Please print clearly***

Name(s): \_\_\_\_\_

Home Address \_\_\_\_\_

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

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

LEASE PERIOD DATES: From: \_\_\_\_\_ To: \_\_\_\_\_

Permission for pet? No  Yes  Number/Type of Pet(s): \_\_\_\_\_

As owner(s), I (we) have provided the tenant with a current copy of the Pine Run Community Rules and Information for their use, and so attest by my (our) signature(s) below:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Date \_\_\_\_\_

**APPLICATION FOR LEASE OF UNIT**

Lease of Unit #: \_\_\_\_\_ Date of Application: \_\_\_\_\_

**TENANT INFORMATION - *Please print clearly***

Name(s): \_\_\_\_\_

Home Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Number of persons occupying unit: \_\_\_\_\_ Number/Type of Pets: \_\_\_\_\_

Car License #: \_\_\_\_\_ State: \_\_\_\_\_

Car License #: \_\_\_\_\_ State: \_\_\_\_\_

Have you been a renter at Pine Run in the last 2 years? Yes \_\_\_ No\_\_\_

As tenant, I (we) have received a current copy of the Pine Run Community Rules and Information. I (we) will comply with them and so attest by my (our) signature(s). Also, I (we) agree to participate in an information session with an association representative.

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

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

## PINE RUN CARPORT LEASE NOTIFICATION

An owner must notify the Board of a carport lease by filling out this form and sending it to: Pine Run Association, c/o Keys-Caldwell, Inc. 1162 Indian Hills Blvd., Venice, FL 34293 Phone: 941-408-8293  
Email: [kcweb@keyscaldwell.com](mailto:kcweb@keyscaldwell.com)

The Association does not require a fee for the lease of a carport.

### OWNER'S INFORMATION:

Name: \_\_\_\_\_ Unit #: \_\_\_\_\_

Phone: \_\_\_\_\_

### LESSEE'S INFORMATION:

Name: \_\_\_\_\_ Unit #: \_\_\_\_\_

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

Make and Model of Car: \_\_\_\_\_ Color: \_\_\_\_\_

License Plate #: \_\_\_\_\_ State: \_\_\_\_\_

Date of Lease: \_\_\_\_\_ Length of Lease: \_\_\_\_\_

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

## NON-LEASE OCCUPANCY - SHORT TERM

OWNER INFORMATION:

Name: \_\_\_\_\_ Unit #: \_\_\_\_\_ Phone #: \_\_\_\_\_

GUEST INFORMATION:

Name: \_\_\_\_\_ Phone # \_\_\_\_\_

Relation to Owner: \_\_\_\_\_

Other Occupant(s) Name(s): \_\_\_\_\_

Emergency Contact Name and Phone: \_\_\_\_\_

GUEST VEHICLE INFORMATION:

Make and Model of Car: \_\_\_\_\_ Color: \_\_\_\_\_  
\_\_\_\_\_

License Plate #: \_\_\_\_\_ State: \_\_\_\_\_

DATES OF OCCUPANCY From \_\_\_\_\_ To \_\_\_\_\_

- Any one stay must be limited to no more than 14 days.
- Units may be occupied by a maximum of two (2) persons per bedroom.
- No transaction fee is required.
- Guests are required to follow Pine Rule Rules and Regulations
- This notification must be submitted 10 days prior to guest occupancy to:  
Keys-Caldwell, Inc.c/o Pine Run,1162 Indian Hills Blvd., Venice, FL  
34293 FAX # 941-408-8664

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

### NON-LEASE OCCUPANCY - LONG TERM

Unit #: \_\_\_\_\_ Date of Application: \_\_\_\_\_

**OWNER INFORMATION - Please print clearly**

Name(s): \_\_\_\_\_

Home Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

OCCUPANCY DATES: From \_\_\_\_\_ To \_\_\_\_\_

Permission for pet? No \_\_\_ Yes \_\_\_

**RESIDENT INFORMATION - Please print clearly**

Name(s): \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Number of persons occupying unit: \_\_\_\_\_ #/Type of Pets: \_\_\_\_\_

Car License #: \_\_\_\_\_ State: \_\_\_\_\_

Car License #: \_\_\_\_\_ State: \_\_\_\_\_

As a new resident, I (we) have received a current copy of the Pine Run Community Rules and Information. I (we) will comply with them and so attest by my (our) signature(s). Also, I (we) agree to participate in an information session with an association representative.

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

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

Attached:  Copy of Driver's License(s) for Resident(s)  \$50 Fee

## RESIDENT VOLUNTEER WAIVER

Volunteer's Full Name: \_\_\_\_\_ Unit #: \_\_\_\_\_

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

E-mail: \_\_\_\_\_

I, \_\_\_\_\_, (hereafter known as Volunteer Resident) desire to work as a volunteer for the Pine Run Condominium Association (hereafter known as the Association) and engage in the activities related to being a volunteer for work projects. I hereby voluntarily execute this Volunteer Waiver under the following terms:

I, Volunteer Resident, release and hold harmless the Association and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from my volunteer work with the Association.

I understand that this Waiver discharges the Association from any liability or claim that I, the Volunteer, may have against the Association with respect to bodily injury, personal injury, illness, death, or property damage that may result from my participation of the Association's work site. I also fully understand that the Association does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health or disability insurance, in the event of injury, illness, death or property damage.

I, Volunteer Resident, understand that I expressly waive any such claim for compensation or liability on the part of the Association beyond what may be offered freely by the representative of the Association in the event of such injury or medical expense.

I hereby release the Association from any claim whatsoever which arises or may arise in the future on account of any first aid treatment or other medical services that are conducted in connection with an emergency during my time with the Association.

I understand that my work with the Association may include various activities that may be hazardous to me and I hereby expressly and specifically assume the risk of injury or harm in these activities and release the Association from all liability for injury, illness, death, or property damage resulting from the activities of my work with the Association. I agree not to use power tools of any kind or climb ladders in the service of the Association.

I expressly agree that this Waiver is intended to be as broad and inclusive as permitted by the laws of the State of Florida in the United States of America, and that this Waiver shall be governed by and interpreted in accordance with the laws of the State of Florida. I agree that in the event that any clause or provision of this Waiver shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

Volunteer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_