

**Normandy T Association, Inc.**  
**Managed by: Wilson Landscaping & Management Corp.**  
**1300 NW 17<sup>th</sup> Ave. Suite 270**  
**Delray Beach, FL 33445**  
**(561)637-3402 Office (561)637-3407 Fax**

**Instructions for Permanent Resident Application – NORMANDY T ASSOCIATION, INC.**

- 1) APPLICATION MUST BE SUBMITTED AT LEAST THIRTY (30) DAYS PRIOR TO MOVE-IN DATE.
- 2) **TWO (2) COMPLETE, SEPARATE SETS OF EVERYTHING LISTED BELOW MUST BE SUBMITTED. ONE SET OF THESE MUST BE THE ORIGINAL PAPERWORK.**
- 3) EACH PAGE MUST BE PROPERLY COMPLETED.
- 4) EACH APPLICATION MUST INCLUDE A PHOTO ID (ON 8 ½ X 11 PAPER) SHOWING DATE OF BIRTH OF EACH OCCUPANT OR OWNER.
- 5) A \$150.00 NON-REFUNDABLE APPLICATION FEE PER PERSON OR MARRIED COUPLE IS REQUIRED ON ALL APPLICATIONS. THE \$150.00 APPLICATION FEE MUST BE MADE PAYABLE TO THE: NORMANDY T ASSOCIATION, INC.
- 6) THE VESTA PROPERTY SERVICES INFORMATION PAGE AT THE END OF THIS APPLICATION MUST BE SIGNED.
- 7) ALL THREE PERSONAL REFERENCE SHEETS **MUST BE COMPLETE, SIGNED** AND PART OF THIS APPLICATION.
- 8) NORMANDY T IS A NO PET ASSOCIATION.
- 9) NORMANDY T IS A NO SMOKING BUILDING. NO SMOKING IS ALLOWED IN THE BUILDING OR ON THE NORMANDY T COMMON AREAS.

**ALL MATERIALS MUST BE PROPERLY COMPLETED AND SUBMITTED TOGETHER OR THIS APPLICATION PACKET MAY NOT BE PROCESSED. OUR OFFICE WILL DO ITS BEST TO EXPEDITE ALL PAPERWORK IN A TIMELY FASHION. WE WOULD LIKE TO CONVEY TO YOU THAT MOST DELAYS ARE CAUSED BY INCOMPLETE PAPERWORK. PLEASE LO OK OVER THESE INSTRUCTIONS CAREFULLY. PLEASE CALL OUR OFFICE (561) 637-3402 WITH ANY QUESTIONS BEFORE SENDING COMPLETED PACKETS IN.**

Are you a service member as defined by s.250.01 Florida Statutes: Yes \_\_\_\_\_ No \_\_\_\_\_

The term “service member” is defined by s.250.01, Florida Statute to include any person serving as a member of the United States Armed Forces on active duty and all members of the Florida National Guard and the United States Reserve Forces.

**RESIDENCE HISTORY**

Present address \_\_\_\_\_

Phone \_\_\_\_\_

Apt. or Condo Name \_\_\_\_\_ Phone \_\_\_\_\_

Dates of Residency: From \_\_\_\_\_ to \_\_\_\_\_

Circle one: Own Home - Parent/Family Member - Rented Home – Rented

Rent/Mtg Amount \_\_\_\_\_

Are you on the Lease? \_\_\_\_\_

If not, who is the leaseholder? \_\_\_\_\_

Are you on the Deed? \_\_\_\_\_

If yes, under what name? \_\_\_\_\_

Name of Landlord \_\_\_\_\_ Phone \_\_\_\_\_

Email address \_\_\_\_\_

Circle one: Is your Landlord the: Owner of the property - Realtor - Family Member -  
Roommate - Property Manager - Other \_\_\_\_\_

Previous address \_\_\_\_\_

Apt. or Condo Name \_\_\_\_\_ Phone \_\_\_\_\_

Dates of Residency: From \_\_\_\_\_ to \_\_\_\_\_

Circle one: Own Home - Parent/Family Member - Rented Home - Rented Apt – Other

Rent/Mtg Amount \_\_\_\_\_

Were you on the Lease? \_\_\_\_\_

If not, who is the leaseholder? \_\_\_\_\_

Were you on the Deed? \_\_\_\_\_

If yes, under what name? \_\_\_\_\_

Name of Landlord \_\_\_\_\_ Phone \_\_\_\_\_

Email address \_\_\_\_\_

Circle one: Is your Landlord the: Owner of the property - Realtor - Family Member -  
Roommate - Property Manager - Other \_\_\_\_\_

## EMPLOYMENT REFERENCES

Employed by \_\_\_\_\_

Phone \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_ Position \_\_\_\_\_

Fax \_\_\_\_\_

Monthly Gross Income \_\_\_\_\_

Address \_\_\_\_\_

Spouse Employed by \_\_\_\_\_ Phone \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_ Position \_\_\_\_\_ Fax \_\_\_\_\_

Monthly Gross Income \_\_\_\_\_ Address \_\_\_\_\_

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## Permanent Resident Information Sheet

**ASSOCIATION:** NORMANDY T ASSOCIATION, INC. **UNIT #:** \_\_\_\_\_

Name of current Owner's: \_\_\_\_\_

Current Owner's Address: \_\_\_\_\_

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

Current Owner's Phone Number: \_\_\_\_\_ Current Owner's Cell Number: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ SS#: \_\_\_\_\_ Age: \_\_\_\_\_

Co-Applicant: \_\_\_\_\_ SS#: \_\_\_\_\_ Age: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

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

Applicant's Phone: \_\_\_\_\_ Applicant's cell phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Vehicle Information:

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Plate # \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Plate # \_\_\_\_\_

### PLEASE LIST ALL OCCUPANT(S) WHO WILL RESIDE AT UNIT IF APPROVED

<i>Name</i>	<i>Relationship to Purchaser</i>	<i>Date of Birth</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

PLEASE PROVIDE NAME AND ADDRESS OF WHERE TO SEND APPROVED CERTIFICATE OF APPROVAL:

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## Permanent Resident(s) Agreement

In making this application to reside in the unit noted on page one of this application, I/ we understand that acceptance of the application is conditioned on the approval of the Board of Directors.

- Agree that if the application is approved, to abide by all the Rules and Regulations, By-Laws and any and all restrictions of the association and any changes that may be imposed in future.
- Agree that the unit may not be occupied in my absence without the prior knowledge of the Board.
- Permanent Resident(s), acknowledge receipt of a copy of the Condominium Documents and understand that the unit may not be sold or leased with out the approval of the Board. It is the permanent resident's responsibility to obtain Condominium Documents from current owner. They may be purchased from Wilson Management for \$100.00 if necessary.
- Have enclosed a check in the amount of \$150.00 **PER PERSON OR MARRIED COUPLE** payable to **Normandy T Association** as provided for by Florida Statutes and by the Condominium Documents.
- Understand that if any check paid by the Owner(s), and/or Permanent Resident(s), is returned unpaid, any approval granted will be voided.
- Normandy T is a no pet Association.
- No smoking is allowed on the Normandy T common areas.

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Applicant's Signature

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Date

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Applicant's Signature

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Date

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## Age Verification Questionnaire

**Association:** NORMANDY T ASSOCIATION, INC. **Unit:** \_\_\_\_\_

Please list every person who will be residing at this address. Please supply independent photographic evidence indicating date of birth (such as Driver's License or Passport) of each occupant.

OWNER(S) NAME	AGE	TYPE OF ID	DOB	RELATIONSHIP

Signature(s) of Owner(s)

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

Normandy T Association, Inc.

DECLARATION OF LIFT USE RESTRICTIONS

The lift is designed transport individuals, and their groceries.

It is in no way designed or intended to transport any kind of freight, appliances, plumbing fixtures, etc.

Use of the lift shall be limited to the Owners/Renters, and the family members, tenants, and guests of such Owners/Renters.

Damage caused by users will be the sole responsibility of the Unit Owner/Renter permitting its use.

The lift SHALL NOT be used by any Licensee, Contractor or hired delivery.

The lift should not exceed the 750-pound weight limit. For example: One (1) wheelchair and two (2) persons or three (3) persons at any one time. No more than three (3) persons permitted.

Garbage bags should be tightly sealed to deter spillage on the cab floor. This is for everyone's safety as well as to maintain cleanliness.

If a wheelchair is used in the lift, please apply brakes to the wheelchair to avoid movement when on the lift.

I/We have read the above Lift Use Restrictions and agree to abide by said restrictions.

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

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

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

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Normandy T is a no pet association.

**Pets.** No animals or pets of any kind shall be kept in any unit or on any property of the Condominium. This subsection shall not be amended unless approved by the board of directors of a majority of all the condominium associations located at the Kings Point Project.

I/we \_\_\_\_\_ understand that there are no pets of any kind allowed in the Normandy T Association, Inc.

As purchaser(s)/lessee(s) of unit \_\_\_\_\_, I/we agree that we will not have any pets of any kind.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

State of \_\_\_\_\_

County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_ by \_\_\_\_\_. They are personally known to me or have produced \_\_\_\_\_ as identification.

State of \_\_\_\_\_

\_\_\_\_\_  
Notary Public Signature

County of \_\_\_\_\_

\_\_\_\_\_  
Printed Name

(seal)

\_\_\_\_\_  
Certificate Number

\_\_\_\_\_  
My commission expires:



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## Request for Personal Reference

**Association:** NORMANDY T ASSOCIATION, INC. **Unit:** \_\_\_\_\_

Dear Sir/Madam:

\_\_\_\_\_ has listed you as a character reference in an application to reside in an apartment in the above referenced Condominium Association.

As part of the application process, we respectfully request any information you can give use regarding their character and integrity. Please respond by providing brief comments in the space provided below, as quickly as possible.

Failure to return immediately could result in unnecessary delays to the Applicant's closing and/or move in date. The Association requires a minimum of thirty (30) days to properly review, approve and submit approval prior to the actual move in and/or closing date.

Thank you in advance for your valuable assistance, and we assure you that your reply will be kept confidential.

CHARACTER:

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INTEGRITY:

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OTHER COMMENTS:

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Phone/Cell Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

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Thank you in advance for your valuable assistance, and we assure you that your reply will be kept confidential.

CHARACTER:

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INTEGRITY:

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OTHER COMMENTS:

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Phone/Cell Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

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**Unit:** \_\_\_\_\_

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Thank you in advance for your valuable assistance, and we assure you that your reply will be kept confidential.

CHARACTER:

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INTEGRITY:

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OTHER COMMENTS:

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Phone/Cell Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code



**DISCLOSURE AND AUTHORIZATION  
FOR CONSUMER REPORTS**

In connection with my application for occupancy for a dwelling and or Residential with NORMANDY T ASSOCIATION, INC., I understand consumer reports will be requested by you (“Company”). These reports may include, as allowed by law, the following types of information, as applicable: names and dates of previous employers, reason for termination of employment, work experience, reasons for termination of tenancy, former landlords, education, accidents, licensure, credit, etc. I further understand that such reports may contain public record information such as, but not limited to: my driving record, workers’ compensation claims, judgments, bankruptcy proceedings, evictions, criminal records, etc., from federal, state, and other agencies that maintain such records.

In addition, investigative consumer reports (gathered from personal interviews, as applicable, with former employers or landlords, past or current neighbors and associates of mine, etc.) to gather information regarding my work or tenant performance, character, general reputation and personal characteristics, and mode of living (lifestyle) may be obtained.

**This authorization is conditioned upon the following representations of my rights:**

I understand that I have the right to make a request to the consumer reporting agency: **United Screening Services, Corp.**(name) (“Agency”), **P.O. Box 55-9046, Miami, FL. 33255-9046** (address), telephone number **(305) 774-1711 or (800) 731-2139**, upon proper identification, to obtain copies of any reports furnished to Company by the Agency and to request the nature and substance of **all information** in its files on me at the time of my request, including the sources of information, and the Agency, on Company’s behalf, will provide a complete and accurate disclosure of the nature and scope of the investigation covered by any investigative consumer report(s). The Agency will also disclose the recipients of any such reports on me which the Agency has previously furnished within the two year period for employment requests, and one year for other purposes preceding my request (California three years). I hereby consent to Company obtaining the above information from the Agency. I understand that I can dispute, at any time, any information that is inaccurate in any type of report with the Agency. I may view the Agency’s privacy policy at their website: **www.unitedscreening.com**.

I understand that if the Company is located in California, Minnesota or Oklahoma, that I have the right to request a copy of any report Company receives on me at the time the report is provided to Company. By checking the following box, I request a copy of all such reports be sent to me. Check here:

As a California applicant, I understand that I have the right under Section 1786.22 of the California Civil Code to contact the Agency during reasonable hours (9:00 a.m. to 5:00 p.m. (PTZ) Monday through Friday) to obtain all information in Agency’s file for my review. I may obtain such information as follows: 1) In person at the Agency’s offices, which address is listed above. I can have someone accompany me to the Agency’s offices. Agency may require this third party to present reasonable identification. I may be required at the time of such visit to sign an authorization for the Agency to disclose to or discuss Agency’s information with this third party; 2) By certified mail, if I have previously provided identification in a written request that my file be sent to me or to a third party identified by me; 3) By telephone, if I have previously provided proper identification in writing to Agency; and 4) Agency has trained personnel to explain any information in my file to me and if the file contains any information that is coded, such will be explained to me.

**Are you a service member as defined by s. 250.01, Florida Statutes?** Yes  No

*The term “service member” is defined by s.250.01, Florida Statute to include any person serving as a member of the United States Armed Forces on active duty or state active duty and all members of the Florida National Guard and United States Reserve Forces.*

I understand that I have rights under the Fair Credit Reporting Act, and I acknowledge receipt of the Summary of Rights \_\_\_\_\_ (initials).

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

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

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

For identification purposes:

Social Security No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Driver's License No.: \_\_\_\_\_; State of Issue: \_\_\_\_\_

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

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

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

Phone Number: (\_\_\_\_\_) \_\_\_\_\_

**EACH APPLICANT MUST COMPLETE A SEPARATE DISCLOSURE AND AUTHORIZATION FORM!**



**KINGS POINT**  
GOLF AND COUNTRY CLUB  
*Where Exceptional Lifestyle Begins*

**RENTAL and RESALE INFORMATION**  
**ID OFFICE**  
**561-499-3335 Ext. 136 & 135**  
**Monday – Friday 9:00 AM – 4:00 PM**  
**Closed Saturday and Sunday**

**Fees** (All fees subject to change)

- Capital Contribution & Processing Fee-includes one (1) Resident ID Card & one (1) Barcode  
**\$2,000.00** (Applicable to all resales and transfers of ownership as of January 1, 2025)
- Resident ID \$60.00
- Single Resident ID \$60.00
- Lessee ID \$60.00
- Guest ID \$10.00 (See procedural guide for further details)
- Health Aide ID \$50.00 (Three months)
- Barcode \$10.00
- Saxony RFID Tag \$10.00

**Requirements:** Coincident with submission of an application for purchase of any unit, proof of payment of the Capital Contribution & Processing Fee **must be included.**

Before issuing **Resident ID cards**, we must receive the following:

- A copy of the Certificate of Approval from the association's management company approved by an association officer with the association seal and,
- The previous owner's ID card(s) must be turned in to Kings Point's ID office. If the ID card(s) cannot be located, a \$60 fee for each outstanding ID card must be paid before new ID cards will be issued. **Checks payable to: Kings Point Recreation Corp., Inc.**
- **Note:** Maximum of two (2) resident ID cards per unit. The first ID card purchased for a resident/lessee must be issued to an individual fifty-five (55) years of age or older.

Before we can issue **Lessee ID cards**, the ID office must receive the following:

- A copy of the Certificate of Approval from the association's management company approved by an association officer with the association seal, along with a lease and,
- Any outstanding ID cards issued for that unit must be turned in.
- As of August 6, 2015, any unit that is SOLD, if there is an existing lease on the unit AND the lessee turns in their ID cards, ID Cards can be purchased by the new owner, even if the lease has not expired.
- Any Owner or Tenant that breaks the lease, the existing rule below still follows:

**Resident ID card(s) will not be issued or another Lessee ID card(s) will not be issued until the expiration of the current lease. No Exceptions!**

**Kings Point Recreation Area Amenities**

The Recreation facilities consist of three (3) clubhouses, swimming pools, Natatorium, golf courses, tennis, shuffleboard, pickleball, bocce ball, racquetball and basketball courts, canals, entry gates and roads of the community and other common facilities. Kings Point is a “**NO PET**” community. The Recreation Area does not include condominium property and its parking areas or common grounds. Our residents also have use of the Kings Point buses. The buses serve the community, the immediate surrounding areas and shopping centers. To ensure that residents and their guests have exclusive access to all recreation facilities, a Kings Point ID is necessary. The ID cards are issued in the **ID Office located in the Administration Building**.

**PLEASE READ CAREFULLY BEFORE SIGNING!!!!**

\*Signature: \_\_\_\_\_ \*Signature: \_\_\_\_\_  
Seller/Owner Buyer/Tenant

**\*\*\*\*Effective January 1, 2025\*\*\*\***

**Note: Capital Contribution & Processing Fee** of \$2,000.00 *payable to:* **Kings Point Recreation Corporation, Inc.**, the Not For Profit Corporation organized under Florida Statute 617, authorized to manage the Recreation Facilities, **must be submitted** with application for purchase.



## KINGS POINT USER ACCOUNT REGISTRATION

**SIGN IN or CREATE AN ACCOUNT at the [kingspointdelray.com](http://kingspointdelray.com) website**

The enhanced access control system is ready to launch and will be linked to the Kings Point ID system so that you can start developing your list of friends and family for your Permanent/ Temporary/ Vendor gate access.

1. Every resident that has a Community ID are already in the ID system. Those of you that have purchased theater tickets using the Internet have already activated their accounts.
2. For each resident, there will only be ONE account. It will allow you to maintain a Permanent/ Temporary/Vendor Guest list, purchase tickets to our theater and register for "T Times" at the golf course. It will also link purchased theater tickets into the data base so that security will know who is on our property. Remember – persons who do not have ID cards will not be able to activate an account.
3. Activate your account by going to the [kingspointdelray.com](http://kingspointdelray.com) website.
  - a. On the "Home Page" click on the "Gate Access/Visitor Management" link in order to sign in or create an account.
  - b. Click on "Create Account" and a new screen will appear. The badge number and name you fill in must match the name as it appears on your ID. When creating your account you select a user name and the password. Note the password restrictions listed at the bottom of the page. Make sure that you keep your user name and password in a safe place, as you will need it every time you access your account. When completed, click on "Create User" at the bottom of the page. You have now completed your part of the activation process.
  - c. You will be notified when your account has been activated (within 72 hours).
4. If two persons living in a unit have different last names, it is advisable for each to activate his/her own account. The two accounts will be linked by unit address so that when purchasing tickets during the restricted period, a unit can still only purchase two tickets.
5. Populate your account by going to the [kingspointdelray.com](http://kingspointdelray.com) website and click on the "Gate Access/Visitor Management" link.
  - a. Click on "Sign In" and enter your user name and password.
  - b. Click on "Sign Me In" and fill in the data requested. Permanent Visitors do not need a visit date. Temporary Visitors will need to fill in the dates for each visitor. Names on the "Temporary" list are automatically deleted at the end of their authorized access time.
  - c. The "Permanent" list will be updated on an annual basis.
  - d. Vendors that issue their employees identification cards, i.e. the Post Office and FedEx do not need to be added to your list.
6. **Do not have a computer?** Call the Staff Office at 561-499-3335/ 561-499-7751 Ext. 225 for an appointment. The Staff will help you activate your account and enter the data.
7. Target date to activate the system at the Normandy Gate is on Monday, May 4th. Once the system is running smoothly at the Normandy Gate, the other manned gates at Kings Point will be implemented.

Like any new major change, this will require your patience as it is a massive programming effort with links to several existing systems. However, you can help in the implementation if you are a resident by obtaining your Kings Point ID. All Residents and Lessees with a vehicle should purchase a barcode for easy access thru the gates.

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**[www.wilsonmanagement.net](http://www.wilsonmanagement.net)**  
**<https://wilsonmgt.cincwebaxis.com>**  
**[info@wilsonmanagement.net](mailto:info@wilsonmanagement.net)**

**Please be advised that anyone who purchases, and/or rents a unit on or after February 7, 2022, is not allowed to smoke on, in, or around the Condominium, including within the Units and on balconies.**

Section 14.12 of Article 14 of the Normandy T Declaration was amended on February 7, 2022, as follows:

14.12 Smoking. Smoking of any substance is prohibited on, in, or around the Condominium Property including within the Units and on balconies. Existing owners as of the date of this amendment is recorded (February 7, 2022) will be grandfathered.

I/We \_\_\_\_\_, acknowledge this restriction and will abide accordingly as the renter/owner of \_\_\_\_\_ Normandy T.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

EXHIBIT "8"

CONDOMINIUM RULES AND REGULATIONS

The Condominium Rules and Regulations hereinafter enumerated shall be deemed in effect until amended by the Management Firm, as previously provided, and thereafter, by the Board of Directors, and shall apply to and be binding upon all unit owners. The unit owners shall, at all times, obey said Rules and Regulations and shall use their best efforts to see that they are faithfully observed by their families, guests, invitees, servants, lessees and persons over whom they exercise control and supervision. Said Condominium Rules and Regulations are as follows:

1. The sidewalk, entrances, passages, elevators, if applicable vestibules, stairways, corridors, halls, and all of the common elements must not be obstructed or encumbered or used for any purpose other than ingress and egress to and from the premises; nor shall any carriages, velocipedes, bicycles, wagons, shopping carts, chairs, benches, tables, or any other object of a similar type and nature be stored therein. Children shall not play or loiter in halls, stairways, elevators, or other public areas.
2. The personal property of all unit owners shall be stored within their Condominium units, or where applicable, in an assigned storage space.
3. No garbage cans, supplies, milk bottles, or other articles shall be placed in the halls, on the balconies, or on the staircase landings, nor shall any linens, clothes, clothing, curtains, rugs, mops or laundry of any kind, or other article, be shaken or hung from any of the windows, doors or balconies, or exposed on any part of the common elements. Fire exits shall not be obstructed in any manner, and the common elements shall be kept free and clear of rubbish, debris, and other unsightly material.
4. No unit owner shall allow anything whatsoever to fall from the window, balcony or doors of the premises, nor shall he sweep or throw from the premises any dirt or other substance into any of the corridors, halls or balconies, elevators, ventilators, or elsewhere in the building or upon the grounds.
5. Refuse and bagged garbage shall be deposited only in the area provided therefor.
6. NO UNIT OWNER SHALL STORE OR LEAVE BOATS OR TRAILERS ON THE CONDOMINIUM PROPERTY.
7. Employees of the Association or Management Firm shall not be sent out of the building by any unit owner at any time for any purpose. No unit owner or resident shall direct, supervise, or in any manner attempt to assert any control over the employees of the Management Firm or Association.
8. Servants and domestic help of the unit owners may not gather or lounge in the public areas of the building or grounds.

9. The parking facilities shall be used in accordance with the regulations adopted by the Management Firm, as previously provided, and thereafter, by the Board of Directors. No vehicle which cannot operate on its own power shall remain on the Condominium premises for more than twenty-four hours, and no repair of vehicles shall be made on the Condominium property.

10. The type, color and design of chairs and other items of furniture and furnishings that may be placed and used on any screened porch may be determined by the Management Firm, as previously provided, and thereafter, by the Board of Directors, and a unit owner shall not place or use any item on a screened porch without the approval of said Management Firm and, thereafter, by the Board of Directors of the Association.

11. No unit owner shall make or permit any disturbing noises in the building by himself, his family, servants, employees, agents, visitors and licensees, nor do or permit anything by such persons that will interfere with the rights, comforts or convenience of the unit owners. No unit owner shall play upon or suffer to be played upon, any musical instrument, or operate or suffer to be operated, a phonograph, televisions, radio or sound amplifier, in his unit, in such manner as to disturb or annoy other occupants of the Condominium. No unit owner shall conduct or permit to be conducted, vocal or instrumental instruction at any time.

12. No radio or television installation, or other wiring, shall be made without the written consent of the Management Firm, as previously provided, and thereafter, by the Board of Directors. Any antenna or aerial erected or installed on the roof or exterior walls of the building, without the consent of the Management Firm, and thereafter, the Board of Directors, in writing, is liable to removal without notice and at the cost of the unit owner for whose benefit the installation was made.

13. No sign, advertisement, notice or other lettering shall be exhibited, displayed, inscribed, painted or affixed in, on, or upon any part of the Condominium unit or Condominium property, by any unit owner or occupant.

14. No awning, canopy, shutter or other projection shall be attached to or placed upon the outside walls or roof of the building without the written consent of the Management Firm, as previously provided and, thereafter, by the Board of Directors.

15. No blinds, shades, screens, decorative panels, windows or door covering shall be attached to or hung, or used in connection with any window or door in a unit, in such a manner as to be visible to the outside of the building, without the written consent of the Management Firm, as previously provided, and thereafter, the Board of Directors of the Association.

16. The Association may retain a pass key to all units. No unit owner or occupant shall alter any lock or install a new lock without the written consent of the Management Firm, as previously provided, and thereafter, the Board of Directors of the Association. Where such consent is given, the unit owner shall provide the Management Firm and the Association with an additional key for use of the Association, pursuant to its right of access to the Unit.

17. No cooking shall be permitted on any screened porch.

18. Complaints regarding the service of the Condominium shall be in writing to the Management Firm, as long as the Management Agreement remains in effect, and thereafter, to the Board of Directors of the Association.

19. No inflammable, combustible or explosive fluid, chemical or substance shall be kept in any unit, except such as are required for normal household use.

20. Payments of monthly assessments shall be made at the Office of the Management Firm, as designated in the Management Agreement. Payments made in the form of checks shall be made to the order of "Point Management, Inc." Payments of regular assessments are due on the 1st day of each month, and if such payments are ten (10) or more days late, same shall be subject to late charges, as provided in the Declaration of Condominium.

21. Each unit owner who plans to be absent from his unit during the hurricane season must prepare his unit prior to his departure by (a) removing all furniture, plants and other objects from his screened porch prior to his departure; and (b) designating a responsible firm or individual to care for his unit should the unit suffer hurricane damage, and furnishing the Management Firm with the name of said firm or individual. Such firm or individual shall contact the Management Firm for clearance to install or remove hurricane shutters.

22. Food and beverage may not be consumed outside of a unit except for such areas as are designated by the Management Firm and Board of Directors of the Association.

23. The Management Firm, as long as the Management Agreement remains in effect, and thereafter, the Board of Directors of the Association, reserves the right to make additional Rules and Regulations as may be required from time to time without consent of the Condominium Association and its members. These additional rules and regulations shall be as binding as all other Rules and Regulations previously adopted.

24. The foregoing initial Rules and Regulations are subject to the paramount provisions, where applicable, of the Declaration of Condominium.

25. No sitting, lounging, sunbathing or loitering or any kind on the lawn in front of, in between and behind Normandy T is permitted

26. Amended Guest Spot Regulation

The guest parking spaces at Normandy T are unfairly weighted toward the 24 units on the west side, sharing 10 guest spots while the 24 units on the east side share only 3 guest spots. As such, effective immediately, the three (3) guest spots on the east half of the building SHALL NOT be used as a parking space for 2<sup>nd</sup> cars or long term parking (more than 2 days) of any kind. Second cars may use guest spaces on the west side of the building on a first come first serve basis. Any guest of a Normandy T resident, parking their car for longer than 2 days, must also use guest spots on the west side of the building. You may make your own arrangements with snowbirds or those not using their assigned parking spaces. Any cars lingering beyond two (2) days in east side guest spaces will be towed away at the owner's expense.

27. APPROVED PETS: Approved pets are NOT to be walked along the walkways at any time. All pets are to be walked at least 10 feet away from the perimeter of the building. Pet owners are responsible to clean up after their approved pets at all times. Violators will be fined \$100.00 per occurrence. Dogs must also be on a leash at all times when outside on the common elements of the Association.

28. REQUESTS FOR INFORMATION: Only one (1) request for information will be processed per month/ thirty (30) days.