## EMERGENCY CONTACT NUMBERS

Shangri-La Homeow	vners Association, In	nc.
UNIT #	DATE	
NAME	PHONE	
In case of emergency please notify:		
Phone		
Name	Relationship	
Address		
City	State	Zip
-0	R-	
Phone		
Name	Relationship	
Address	_	
City	State	Zip
In case of an emergency Unit #	has access to	o my Unit.

## NOTE: THIS DOCUMENT MUST BE KEPT CURRENT. TO UPDATE INFORMATION RE-SUBMIT A NEW FORM TO: rkelly@ameritechmail.com

## FAIR HOSING CENSUS

Shangri-La Homeowners Association, Inc. 250 Rosery Rd, NW,# Largo, FL

The association is required by the Federal Fair Housing Act to verify the age of the occupants of our units to qualify as a 55 plus community. You must provide proof of age of all occupants by one of the following documents. STATE ISSUED PHOTO ID, DRIVER LICENSE, VOTER REGISTRATION,

BIRTH CERTIFICATE, PASSPORT.

## DISCLOSURE INFORMATION

- 1. As a purchaser of property in this community you will be required to be a member of Shangri-La Homeowners Association, Inc.
- 2. There are restrictive covenants governing the use and occupancy of your property. These covenants cannot be changed without the of the association members.
- 3. You will be obligated to pay assessments to Shangri-La Homeowners Association, Inc. and these assessments are subject to change.
- 4. Failure to pay the assessments could result in a lien on your property.
- 5. There is no obligation to pay rent or land use fees for any common elements.
- 6. A copy of the Articles of Incorporation, the By-Laws and the Rules and Regulations have been given to you and you have read and understand them.
- 7. The statements in this Disclosure Summary form are only general in nature and as a purchaser you should refer to the Association's governing documents for complete restrictions.

By signing and dating below I certify that I have been provided with a copy of the Shangri-La Homeowners Association, Inc. <u>ARTICLES OF</u> INCORPORATION BY-LAWS and RULES AND REGULATIONS.

NOTE: THE DOCUMENT MUST IS CLUT CURRENT, REPORT ANY CRANCES TO THIS REPORTATION TO THE ASSOCIATION MANAGER.