



H O M E O W N E R S A S S O C I A T I O N

BOARD MEMBER CANDIDATE INFORMATION SHEET

Complete & Return to: Shurie@dev-services.com or 9601 W State St Ste 203, Boise, ID 83714

Pursuant to the Bylaws of the Laguna Pointe Homeowners Association Inc. (Coast to Coast Subdivision), I understand that the duties and responsibilities of the Homeowners Association Board of Directors include the enforcement of the rules and regulations governing the use and maintenance of Common Areas, Common Facilities, and the personal conduct of Members, their guests and invitees, as detailed in the Declaration of Covenants, Conditions, Restrictions, and Easements for Laguna Pointe HOA (Coast to Coast Subdivision). These responsibilities include the enforcement of all sections of the CC&Rs as well as imposition of penalties, foreclosure of liens, restrictions, and prohibitions on Members as deemed appropriate by the Board. The Board of Directors must also uphold and enforce the Architectural Review Committee Procedures and Guidelines. The Board of Directors ensure the fiduciary duties of the Homeowners Association are fulfilled. The foregoing description is a brief summary of the duties and responsibilities of a Board Member. Complete descriptions can be found in the Laguna Pointe Bylaws and CC&Rs. IF you are interested in applying to join the Laguna Pointe HOA Board of Directors, please fill out the form below and return it to the email address listed above.

NAME _____

ADDRESS _____

Please tell us about your background or experiences that may help you as an Association Board Member.

How do you feel that you can help the Association by serving on the Board?

What is your perception of the duties involved with serving on an Association Board?

I affirm that I will uphold and fulfill all duties and responsibilities as established and set-forth in the Bylaws of Laguna Pointe Homeowners Association Inc., and the Declaration of Covenants, Conditions, Restrictions, and Easements for Laguna Pointe HOA (Coast to Coast Subdivision). I certify that I am a member of the HOA in good standing.

Signature _____ Date _____ DSI Verification _____

CONTACT INFORMATION (To be kept confidential)

EMAIL ADDRESS _____

TELEPHONE NUMBER _____