



ADVANCE RESERVATION PROGRAM

Vicar's Landing has achieved total occupancy. In order to accommodate those individuals who desire a residence that is currently unavailable, and those who desire a priority status in selection at a later date, an Advance Reservation Program has been established. The details of this program are as follows:

- 1) An Advance Reservation Program has been established for those qualified persons who desire a particular style residence which is currently unavailable, and persons 55 and over who desire admission to Vicar's Landing in future years.
- 2) Applicants pay a \$350 non-refundable Application Fee, and a refundable \$3,000 Advance Reservation Deposit, payable to **Vicar's Landing**. Upon receipt of these payments, their names will be placed on the Wait List. This deposit may be credited to the final payment of an Entrance Fee, or may be refunded upon 30 days written notice at any time prior to entrance. Such a refund forfeits any place on the Wait List. The deposit is not transferable.
- 3) Applicants are listed in the order in which the \$3,000 deposit is received. Those desiring admission will be given priority in the order of their place on the list, subject to the availability of the type of apartment desired.
- 4) When a residence has been offered to an Associate Member, the Associate Member has three (3) business days to accept the apartment, with a commitment to meet an occupancy date of sixty (60) days.
- 5) It should be understood that at the time of making application for residency at Vicar's Landing, and placing a 10% deposit, the applicant must fully meet the current admission requirements and pay the Entrance Fee in effect at that time.
- 6) All approved Advance Reservation Program applicants will become Associate Members of Vicar's Landing. The benefits for Associate Members are:
 - a) Enjoyment of Dining facility at any time - charges will be billed monthly.
 - b) Participation in any members' activities which are provided.
 - c) Periodic mailings of activities at Vicar's Landing and mailings of the *Vicar's Voice*, a newsletter published for and by the Vicar's Landing Members.

VL

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2/06/25

Advance Reservation Program



**PONTE VEDRA BEACH, FLORIDA
PRIORITY AGREEMENT**

Priority Number: _____

THIS AGREEMENT, is made and entered into this _____ day of _____, 20____, by and between LIFE CARE PONTE VEDRA, INC., a FLORIDA non-profit corporation (hereinafter called Sponsor) and _____ (hereinafter called Applicant) for the Life Care facility known as VICAR'S LANDING.

W I T N E S S E T H

FOR AND IN CONSIDERATION of a Deposit of Three Thousand Dollars (\$3,000) which does not include a Three Hundred Fifty Dollar (\$350) non-refundable application fee which the Applicant has paid Sponsor, Applicant will be placed on a Wait List for Unit Type _____ in VICAR'S LANDING under the following terms and conditions:

1. The Entrance Fee and Monthly Service Fee for the unit type selected above will be the rate established by Sponsor for said unit type, which rate Sponsor may change at any time in its absolute discretion, prior to Applicant's execution of the Residence and Care Agreement described below.
2. A Confidential Data Application executed by the Applicant is attached to and is made a part of this agreement. However, this Agreement is not binding upon either party as to the intent to establish residency or right of residency or right to receive services and care under the RESIDENCE AND CARE AGREEMENT until such time as a Residence and Care Agreement has been duly executed and all monies required to be paid by said Residence and Care Agreement have been deposited with Sponsor or its authorized agent.
3. Sponsor will notify the Applicant as to the availability of the type of unit indicated above. The Applicant may refuse to accept an offered unit and still maintain his/her position on the Wait List for the indicated unit type.

PRIORITY AGREEMENT

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- 4) When Sponsor notifies the Applicant of the availability of the desired unit, the Applicant shall have three (3) business days from the date of notice to accept the unit with a commitment to meet occupancy date within sixty (60) days. With the execution of the Residence and Care Agreement, the Wait List Deposit will be credited towards the Residence and Care Agreement deposit. If the Applicant does not execute the required documents within the specified period of time, the Applicant thereby forfeits the right to the offered apartment.
- 5) In order to establish "Member" status, Applicant must meet all physical, mental, financial and age qualifications as specified in the Residence and Care Agreement in use at that time.
- 6. Should the Applicant(s) no longer qualify as identified in Five (5) above, the agreement shall automatically terminate and sponsor shall refund the Wait List deposit in full within thirty (30) days.
- 7. The Applicant shall have the right to cancel this Agreement upon thirty (30) days written notice. VICAR'S LANDING shall refund the Applicant's Wait List deposit within sixty (60) days. Upon cancellation by the Applicant, this agreement shall be terminated.

IN WITNESS WHEREOF, the parties hereto have executed this instrument this ____ day of _____, 20 ____.

Witness

Applicant

Witness
Approved this ____ day of _____, 20 ____.

Applicant

By: _____
Title: _____

**LIFE CARE PONTE VEDRA, INC.
d/b/a VICAR'S LANDING**



Apartment Selection Form

Associate Member(s): _____

Email Address: _____

I/We would prefer to move to Vicar's Landing during:

Month Year

Please rank the following residences according to preference. For example, 1st, 2nd, 3rd, etc. You may have only one preference or as many as you would like.

Vicar's Landing at Sawgrass

One Bedroom Apartment

- Ashted (825sf) _____
- Burnham (1000sf) _____

Two Bedroom Apartment

- Epping (1200sf) _____
- Hampstead (1310sf) _____

Three Bedroom Apartment

- Highgate (1500sf) _____

Canterbury Home

- Regent (1460sf) _____
- Wickham (2160sf) _____

Combination Apartment

- Kenley (1860sf) _____
- Lofton (2200-2300sf) _____

Vicar's Landing at Oak Bridge

Flats

- Abington (1400sf) _____
- Brockwell (1450sf) _____
- Preston (1700sf) _____

- Richmond (1850sf) _____
- St. James (2125sf) _____

Cottages

- Sutton (2300sf) _____
- Trent (2400sf) _____

Are there any special preferences you have such as location, first floor, etc.? _____

Signature

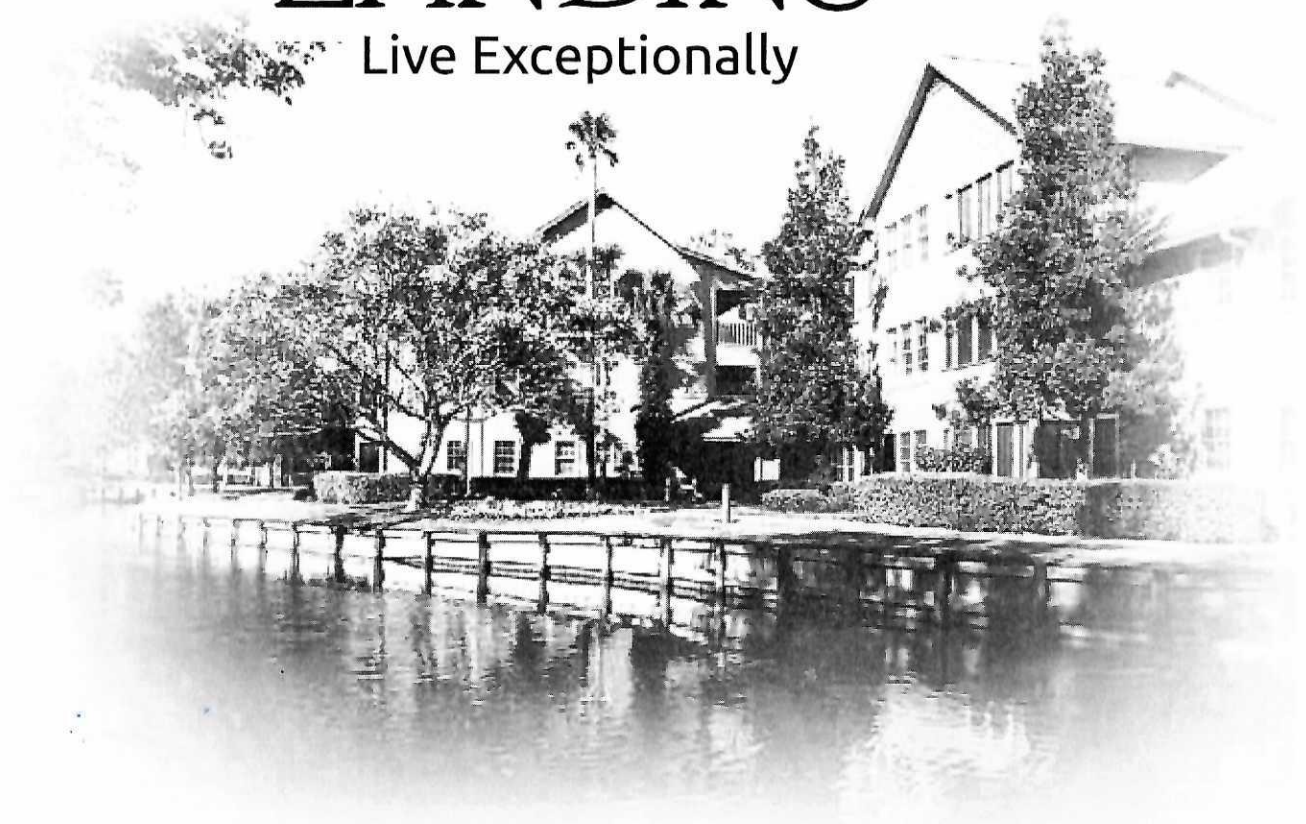
Date

Signature

Date

VICAR'S LANDING

Live Exceptionally



CONFIDENTIAL DATA
APPLICATION

VICAR'S LANDING

Live Exceptionally

CONFIDENTIAL DATA APPLICATION (ALL INFORMATION WILL BE HELD CONFIDENTIAL)

Please Print Clearly or Type

1. Applicant #1. Full Name (Mr. / Mrs. / Ms.): _____
Last First Middle

Address: _____
Street City State Zip Code

Telephone No.: () _____ Cell No.: () _____

Birth Date: _____ Email Address _____
Month Day Year

Marital Status: Married _____ Single _____ Widowed _____ Divorced _____

Number of Children: _____

2. Applicant #2. Full Name (Mr. / Mrs. / Ms.): _____
Last First Middle

Address: _____
Street City State Zip Code

Telephone No.: () _____ Cell No.: () _____

Birth Date: _____ Email Address _____
Month Day Year

Marital Status: Married _____ Single _____ Widowed _____ Divorced _____

Number of Children: _____

3. Personal References:

_____	_____	_____
Name	Address	Telephone No.
_____	_____	_____
Name	Address	Telephone No.

4. Children or Nearest Relative: _____

Address: _____
Street City State Zip Code

Telephone No.: () _____ Cell No.: () _____

5. What was/is your occupation? _____

6. What are your hobbies or interests? _____

7. Church Affiliation: _____

8. Licensed to drive a car? Yes ___ No ___ Would you bring a car? Yes ___ No ___ How Many? ___

9. Are you capable of Independent Living without help from anyone else?

Applicant #1: Yes ___ No ___ Applicant #2: Yes ___ No ___

10. Medicare No. (Applicant #1): _____

Medicare No. (Applicant #2): _____

Supplemental Health Insurance: _____

Insurer: _____ Policy No.: _____

11. Health Condition - Please explain any major change in your general health in the past year and any chronic illness or disability:

Applicant #1: _____

Applicant #2: _____

12. Please provide name, address and telephone number of primary physician:

Applicant #1: Physician name: _____

Physician address: _____

Physician Telephone: _____

Applicant #2: Physician name: _____

Physician address: _____

Physician Telephone: _____

We reserve the right to request a financial update from those seeking residency more than one (1) year after the filing of this application.

 VICAR'S
LANDING
AT
SAWGRASS

1000 Vicar's Landing Way
Ponte Vedra Beach, Florida, 32082

VICAR'S
LANDING
AT
OAK BRIDGE 

251 English Oak Lane
Ponte Vedra Beach, Florida, 32082



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