

**BRIGHTON ESTATES PROPERTY OWNERS ASSOCIATION, INC.**  
**MEMBERSHIP APPLICATION**

**MISSION STATEMENT**

It is the Mission of Brighton Estates Property Owners Association to improve the value and utility of the properties in the Brighton Estates Subdivisions for the Members of the Association. In particular, the Association seeks to build a community that includes water, fire-protection and the normal obtainment of building permits.

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

Owner(s)' Mailing Address : \_\_\_\_\_

Owner(s)' Preferred Email Address(es): \_\_\_\_\_

Owners(s)' Preferred Phone Number(s): \_\_\_\_\_

Brighton Estates Address (if available): \_\_\_\_\_

Brighton Estates Owner Lot(s) #: \_\_\_\_\_

Property Location (circle one): Brighton Estates Subdivision 1 2 4 4a Metes/Bounds

I/we hereby submit this application, request membership in the Brighton Estates Property Owners Association, Inc., and affirm that I/we:

1. Am/are owners of Record of the above-referenced Lots located in the Brighton Estate Property Subdivision and/or a parcel of real property whose metes and bounds description is proximately contiguous to the Subdivision.
  - a. If Owner is a business entity rather than an individual(s), attach documentation that confirms that the undersigned is authorized to submit this application, e.g. Declaration of Trust (relevant language only) or Certificate of Trust, Articles of Incorporation, Certificate/Articles of Organization, Operating Agreement (relevant language only), Bylaws, Corporate Resolution, etc.
2. Have attached a vesting deed that confirms my eligibility for membership or I have previously submitted a vesting deed to the Association which remains valid.
3. Have read, understand and support the Association's above-stated Mission Statement.
4. Have received, read and understand the Association's Bylaws.

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5. Support the Association's Board of Trustees to speak on my behalf as it pertains to the issues facing me and my neighbors who own Lots in the Subdivision or contiguous to the Subdivision.

6. Support the Association's efforts to preserve year-round access to my Property via Park City which includes working with Wasatch County officials, plowing the private parking area during winter months, maintaining gates and equipment, monitoring key distribution, etc.

7. Support the Association's efforts to work with Wasatch County to develop a mechanism that will service my Property with, among other things, road improvements, fire suppression, and water delivery.

\_\_\_\_\_  
Owner(s) Name(s) (Printed)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner(s) Signature

(Signature of at least one Owner of record or Corporate Representative of Owner and corporate title or role.)

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**TO BE COMPLETED BY ASSOCIATION:**

**MEMBERSHIP REQUIREMENTS**

- 1) Date Application Received by Association: \_\_\_\_\_
  - a. Application Complete? (circle) Y or N
  
- 2) Vesting Deed Attached to Application: (circle) Y or N
  - a. If no, is there a vesting deed on file? (circle) Y or N
  
- 3) Payment of Membership Dues Attached to Application: (circle) Y or N
  - a. Method of Payment: (circle) Check # \_\_\_\_\_  
Venmo / PayPal  
Credit Card
  
- 4) Date Application Approved by Association: \_\_\_\_\_
  
- 5) Date Owner Informed of Application Approval: \_\_\_\_\_

\_\_\_\_\_  
Signature of Association Board Member or Officer

\_\_\_\_\_  
Printed Name of Association Board Member or Officer