



ATTACHMENT B
OCEAN PINES ASSOCIATION, INC.
BOARD OF DIRECTORS [YEAR] CANDIDATE REGISTRATION FORM

1. Applicant's Full Legal Name: _____
(Attach a copy of a state issued ID)

Property Owned

I have owned property in Ocean Pines since (date): _____

List of all Ocean Pines property addresses for which I have an ownership stake:

(If your legal name as provided on your state issued ID does not appear on the property deed(s) listed, you are required to attach supporting documentation for proof of ownership.)

Contact Information: Home Phone _____ Mobile Phone _____

Primary Phone to use: Home Phone ____ Mobile Phone ____

Email Address: _____

Primary Mailing address if different from above: _____

2. Answer yes/no to the following questions. Provide explanatory information for any question to which you answer "yes." These questions are optional.

- 1) Are you an incumbent Director completing a second consecutive full term of office?.....YES__ NO__
- 2) Are you ineligible to vote under section 3.01(c) of the Ocean Pines By-Laws?.....YES__ NO__
- 3) Are you currently an employee of the Ocean Pines Association?.....YES__ NO__
- 4) Have you been convicted of a felony within the past 10 years?YES__ NO__
- 5) Are you currently under investigation by Local, State, or Federal Agencies for any alleged crime? YES__ NO__
- 6) Within the past 10 years, have you served on any HOA Board of Directors where you were forcibly removed?YES__ NO__
- 7) Are any other owners of the property listed above currently serving on the Board of Directors? YES__ NO__
- 8) If the property listed above is part of a Trust, are any members of that Trust, representing any other real property in Ocean Pines, currently serving on the Board of Directors?.....YES__ NO__
- 9) Do any of the above properties appear on the deed as Corporations, LLC, Partnership or Agency?YES__ NO__



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(Continued)

3. The following information is suggested, but optional. Attach related information to this application as you desire:

- Memberships in social clubs and/or organizations
- Service on any OPA Advisory Committees
- Chairmanship of any committees
- Service on executive board of any organizations in Ocean Pines
- Service in other communities where you have resided
- Education
- Work Experience

4. Disclosures and agreements

You agree:

- 1) that you will immediately notify the Association Secretary should any of the information provided on this form change at any time prior to the reading of the votes
- 2) that should any of the information provided on this form be found to be incomplete or inaccurate at any time prior to the reading of the votes, the Association Secretary may have cause to consider rescinding your eligibility as a candidate for the Board of Directors
- 3) that should any of the information provided on this form be found to be incomplete or inaccurate after your election to the Board, the Board may have cause to consider removing you
- 4) that if you are approved as a candidate for the Ocean Pines Board of Directors, information provided on this form will be available to the association members, the public and the media
- 5) that if elected, you will familiarize yourself with the Ocean Pines community governing documents, uphold them, and honor the fiduciary responsibility to the Ocean Pines Association.

To the best of my knowledge, I meet the Director eligibility requirements of Section 5.02 of the Association By-Laws and am willing to serve as Director if elected. To be considered for candidacy to the OPA Board of directors, I must complete this and return it with all required attachments to the OPA Assistant Secretary's office at the Administration building at 239 Ocean Parkway to the attention of the Search Committee no later than 4 p.m. Eastern Standard Time on May 10th of the year of the election. If Association offices are not open on May 10th or not open for a full business day, Candidate Registration forms and attachments are then due no later than 4 p.m. Eastern on the next full business day.

Required Attachments:

1. Copy of a State Issued Identification
2. Supporting documentation of Proof of Ownership as required by Section 1

Optional Attachments:

1. Response to any questions in Section 2 of this form
2. Desired Biographical work experience information per Section 3 of this form

Applicant Signature

Date

For Office Use Only:

Received by OPA Date: Signature: OPA Designee	Received by Association Secretary Date: Signature: OPA Secretary	Verification of Property Ownership Section 1 Above Date: Signature: OPA Secretary	Verification of candidacy pursuant to Ocean Pines By-Laws Section 2 Above Date: Signature: OPA Secretary
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