

UNITED LAGUNA WOODS MUTUAL
Petition for Designating a Building as "Smoke-Free"

I am a Member of United Laguna Woods Mutual. I am completing this Petition for Designating a Building as "Smoke-Free" (this "Petition") to request that the Building in which my Manor is located, including all Manors and Common Areas comprising the Building, be designated as non-smoking.

Prior to completing this form, I acknowledge and agree that I have read and understand the document titled "Procedure for Designation of a Building as Smoke-Free" regarding the requirements for approval of this Petition and designation of my Building as non- smoking (the "Procedure"), and that I will be considered the Petitioner under the Procedure. The capitalized terms used in this Petition shall have the same meaning given to them in the Procedure, unless otherwise defined herein.

My information:

Name: _____

Manor Address: _____

Mailing Address: _____

Manor Residents: _____

I understand that this Petition must be signed by all of the Applicable Members subject to an Occupancy Agreement for my Building, on the form attached hereto and identified as the "Petition Agreement Form" (the "Agreement") before this Petition will be considered by the Board, and that an executed "Smoke-Free Amendment to Occupancy Agreement" (the "Amendment") to each Occupancy Agreement for each Manor in my Building must also be submitted with this Petition. If an Agreement and Amendment is not complete and signed by all such Members and submitted with this Petition, then this Petition will be deemed incomplete and returned to me. By signing this Petition, I agree to be bound by the terms of this Petition, the Agreement and the Procedure, and to execute and submit an Amendment for my Occupancy Agreement with this Petition. I understand I must also sign the Petition Agreement Form in my capacity as an Applicable Member. I further understand that all Applicable Members must sign the "Covenant to Run with the Land Regarding Designation of a Building as Smoke-Free" before a notary public, which must be recorded in the Official Records of Orange County, and the Applicable Member shall bear the cost of same ("Covenant"). The Covenant is provided to all Members after the submission of a fully executed petition.

By: _____

Date: _____

Petition Agreement Form

I am a Member of United Laguna Woods Mutual, and I acknowledge and agree that I have read the Petition to which this Agreement is attached and the Procedure governing the Petition. I understand that by executing this Agreement and the attached Amendment to my Occupancy Agreement, I am requesting that the Building in which my Manor is located be designated permanently and forever as a non-smoking Building. I further understand that upon such designation, should it occur, that neither myself nor any current or future residents of, or visitors to, my Manor may smoke any substance (tobacco, marijuana or otherwise) in my Manor or any portion of the Building in which my Manor is located.

Upon such non-smoking designation, any smoking in my Manor will be deemed a violation of my Occupancy Agreement, and could result in, without limitation, termination of my Occupancy Agreement, cancellation of my stock certificate, cancellation of my membership in United and my eviction from my Manor by United, as described in the Procedure. My signature below, which must be executed in front of a notary public who completes the following notary page, and my execution of the "Smoke-Free Amendment to Occupancy Agreement" to my Occupancy Agreement, as well as execution of the Covenant, shall be deemed agreement with and acknowledgement of these potential enforcement actions by United in the event of a smoking violation with respect to my Manor.

I further understand and agree to send, on my own accord, a check in the amount of \$150 payable to United Mutual, which is the fee per Manor required to be submitted with the Petition. This fee shall cover the expense of preparing the necessary legal documents, as well as the recordation costs associated with recording the Covenant.

Name: _____

Manor Address: _____

Mailing Address: _____

Manor Residents: _____

I understand that an original notarized copy of this Agreement signed by each of the Members subject to an Occupancy Agreement for a Manor in my Building, and an original copy of the Amendment, noted above, executed by all such Members for their respective Occupancy Agreements, must be submitted to United before the Petition to which this Agreement is attached will be considered by the Board. If the Agreement and Amendment is not complete and signed by all such Members, then the Petition will be deemed incomplete and my Building will not be designated as smoke-free.

By: _____

Date: _____

ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of Orange)

On _____, before me, _____, Notary Public, personally appeared _____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____ (Seal)

ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of Orange)

On _____, before me, _____, Notary Public, personally appeared _____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____ (Seal)