

Fairway Landings

TO: All Residents
FROM: FLTSA Board of Directors
SUBJECT: Golf Ball Damage
DATE: September 5, 2000

As part of the agreement permitting the Golf Club to continue to use the cart path which encroaches on private property, the Club has agreed to make an annual payment which the Association will earmark to reimburse homeowners who experience golf ball damage. This fund is designed to cover the costs of window or siding damage if the homeowner is unable to obtain the cost reimbursement from the golfer who caused the damage.

There are a few key points to keep in mind regarding the reimbursement process. While the Golf club has verbally agreed to make an annual payment to the Association, including a payment for 1999, we have not signed a final agreement and, therefore, have yet to receive payment.

Secondly, even after the fund is established it will be limited by the Club's contribution. Since the association has been reimbursing homeowners directly, we will reimburse ourselves for the amounts which have been disbursed for the benefit of effected homeowners. It is imperative for homeowners who experience golf ball damage to make every effort to identify the person who caused the damage and obtain reimbursement from them, usually through their homeowner's insurance. In other words, the fund is a secondary form of insurance and is not designed to be the principal reimbursement avenue.

If you experience golf ball damage and are unable to identify the responsible party, you may apply for reimbursement through the Association by using the attached form. Until we get a few years experience to realistically project an annual damage expense, we plan to administer the fund as follow:

1. After failing to identify the person responsible for the damage, complete the attached form.
2. If you experience window damage, you may choose any vendor you wish to replace, in kind, the window which was damaged. We would strongly encourage you to consider Rex Glass on Route 19 as they have had significant experience in replacing windows on Fairway Landings Drive and we found

FAIRWAY LANDINGS TOWNHOMES OF SOUTHPOINTE ASSOCIATION

P.O. Box 520 Meadowlands, PA 15347 Tel. 724-225-2179 Fax 724-225-6991

them to be uniformly good regarding responsiveness, price and quality of workmanship.

3. Attach a copy of your paid bill to the form and submit it as directed by the form.
4. You will be reimbursed for 50% of your out-of-pocket costs within thirty (30) days.
5. Assuming there are sufficient monies in the fund at the end of the golf seasons (November), the remainder of your cost will be reimbursed.
6. If there are insufficient funds available at the end of the season, effected homeowners will receive a pro rata share of the monies still available.

If our experience after the first few years suggests an ability to make full reimbursements when claims are submitted, we will suspend the practice outlined in items # 4 through # 6 above.

Remember, it is to everyone's benefit to try to identify the golfer responsible for the damage. If you are able to do so, you should:

1. Ask to see some form of identification (preferably a photo I.D. such as a driver's license).
2. Write down their name, address and telephone number.
3. Obtain the name of their insurance company and agent's name, if possible.
4. Contact the Golf Pro Shop for assistance. Give the cart number if possible.

Hopefully, this fund will help ease the occasional problems, which stem from living near a golf course.

FLTSA

Board of Directors

Encl.

**Application for Golf Ball Damage
Reimbursement**

Name: _____ Unit #: _____

Date: _____ Tel. #: _____

The FLTSA will reimburse homeowners for out-of-pocket costs sustained in repairing damage caused by golf balls struck from the Southpointe Golf Club course. It is understood that in applying for reimbursement, the homeowner (1) has made reasonable efforts to identify and obtain reimbursement from the person responsible for the damage, (2) understands that the total amount of reimbursement from the special fund will be governed by the monies available in the fund and the number of claims made against it in any given year, and (3) will replace what has been damaged with material of like quality and value.

I understand and accept the provisions outlined above

Signature

Procedure: **Attach paid bill to form**
 Convey to John Zywan – Unit 160
 Partial reimbursement in 30 days
 Additional reimbursement in November