

PURCHASE APPLICANT ORIENTATION CHECKLIST

- 1. ATTACH COPY OF SIGNED PURCHASE CONTRACT.**
- 2. ATTACH PHOTOCOPY OF LICENSE FOR PROOF OF OVER 55 OF AGE**
- 3. ATTACH CHECK FOR \$150.00 PAYABLE TO THE APPROPRIATE ASSOCIATION. EX: PAY PAR 1 NO 1 (High Rise), FAIRWAYS AT PAR 2, or FAIRWAYS AT PAR 4.**
- 4. APPLICANT MUST CALL PROPERTY MANAGEMENT OFFICE AT 239-455-4740 TO SET UP AN ORIENTATION MEETING.**
- 5. REAL ESTATE AGENT OR OWNER IS TO OBTAIN APPROVAL FROM PROPERTY MANAGEMENT OFFICE.**
- 6. ASSOCIATION HAS 30 DAYS TO APPROVE APPLICATIONS. APPLICATION FOR PURCHASE**

I/We _____ hereby apply for approval to purchase condo Unit # _____ in building# _____

Name of purchaser _____

Birth Date _____ Phone # _____

Email: _____

Name of purchaser _____

Birth Date _____ Phone # _____

Email: _____

Name of Real Estate Agent or Owner: _____

Phone# _____

Email of Agent or Owner _____

Please list the name, relationship, and age of all other persons who will be occupying the condo. (One Person Must be 55 Years of Age or older. No one under 18 Years of age).

Name_____Relationship_____Age:___

Name_____Relationship_____Age___

Name_____Relationship_____Age:___

Name_____Relationship_____Age:___

Emergency Contact: Name: _____Phone:_____

Vehicle Information (only 2 Vehicles allowed per unit) Must have decal (office provided) on Vehicle. (drivers side back window or bumper)

Make/Model:_____Color_____Tag/State:_____Year:___Make/Model:_____
_____Color_____Tag/State:_____Year:___

APPLICATION FOR PURCHASE Building # _____Unit # _____

I/We understand that one person must be 55 or older to reside in the residence. No one under the age of 55 may reside in the residence without the qualifying 55+ person in residence at all times. Failure to comply constitutes justification for eviction. Yes/No Initial:_____

I/We Authorize the association to utilize the information contained within this application to determine the undersigned's suitability to reside in the community.

Initial: _____

I/We are aware of and agree to abide by the Rules and Regulations of the Association and all other Rules and Regulations in effect within the terms of my(our) occupancy. Initial _____

I/We understand and agree that the association, is authorized to act take whatever action may be required, including eviction. to prevent violations by owner or guests.

Initial_____

Have you ever been convicted of a felony or are you presently involved in any litigation? If Yes, please give details on back or separate sheet of paper. Yes/No Initial_____

I/We affirm that the information is factual and true and that any falsification or misrepresentation of the facts in this application shall be cause for automatic rejection and/or eviction. Initial_____

I/We agree to have our name and phone information in the personal Pars phone book: Yes/No Initial:_____

Real Estate Agent must get Association Documents, Pool Fobs, Mailbox Key, Storage Room Key from the previous owner.

*New owner is responsible to contact Collier Financial to set up payment of monthly maintenance assessment fee. Phone 239-774- 7088.

Applicant's Signature:_____ Date_____

Applicant's Signature:_____ Date:_____

Driver License attached Yes/No _____

Orientation completed on: Date _____

Application is: Approved_____Rejected_____
signature:_____