APPLICATION FOR APPROVAL OF PURCHASE OR TRANSFER OF A UNIT

RETURN TO:
BY EMAIL TO:
QUESTIONS:
FORM VERSION:

The association reviews this application only when it is complete. An incomplete application is returned, and the review period begins again when the missing item arrives.

This application does not create a contract, does not obligate the association to approve the transaction, and does not extend any deadline in your purchase contract. Build the association's review period into your closing date.

I. What to Submit

( ) This application, completed in full and signed by every purchaser
( ) A separate background screening authorization signed by each occupant age 18 or older
( ) A copy of a government-issued photo ID for each occupant age 18 or older
( ) A copy of the fully executed purchase contract, including all addenda
( ) The fees shown below
( )

Submit these as well if they apply to you:

( ) Pet registration and current rabies certificate, if an animal will live in or regularly visit the unit
( ) Trust, corporate, or company documents naming the beneficial owners and the occupants, if title will be held by an entity
( ) Letters of administration or a certified death certificate, if the transfer is by inheritance

II. Timing

Complete applications received by are reviewed at the meeting of the The association issues a written decision within days of a complete application.

Orientation for new owners:

III. Fees

Charge	Amount	Payable to	When
Transfer approval fee, per applicant			With this application
Background screening, per adult occupant			With this application

Charge	Amount	Payable to	When
Parking decal or access device, each			With this application

Spouses count as one applicant. A parent or parents and any dependent children count as one applicant. Other co-purchasers each count as one applicant.

Number of applicants: Transfer approval fee due:
Number of adult occupants to be screened: Screening fee due:

An estoppel certificate is a separate document with a separate fee, paid by the party who requests it. Request it from

IV. Unit and Transaction

Unit number: Building:
Property address:
Parking space or garage number: Storage unit number:
Date of purchase contract: Estimated closing date:

Type of transfer: ( ) sale ( ) gift ( ) inheritance ( ) transfer to a trust ( ) transfer to a company ( ) mortgage or refinance only ( ) other:

Use of the unit after closing: ( ) occupied by the purchaser ( ) leased ( ) kept vacant

V. Seller

Seller name or names, as titled:
Current mailing address:
Forwarding address after closing:
Phone: Email:

VI. Closing and Representation

Title company or closing agent:
Closing agent phone: Closing agent email:
Listing brokerage:
Listing agent, phone, email:
Buyer's brokerage:
Buyer's agent, phone, email:

APPLICANT INFORMATION

Complete one copy of this page for each purchaser and each occupant age 18 or older.

Unit number: Page of

VII. Applicant Identity

Full legal name:
Any other name used in the last seven years:
Date of birth: Photo ID type and number:
Current address:
Mailing address after closing, if different:
Mobile phone: Alternate phone:
Email:
Relationship to the other applicants:

Will you occupy the unit as your primary residence? ( ) yes ( ) no

If title will be held by a trust or a company, complete this block as well. If title will be held in your own name, write “not applicable” on the first line and skip the rest.

Exact name of the titleholding entity:
Type of entity and state of formation:
Trustee, manager, or authorized officer:
Every beneficial owner or beneficiary:
Every person who will occupy the unit:
Person designated to receive association notices:
Person designated to cast the vote for this unit:

VIII. Residence History

Provide the last years of residence history for each adult applicant. Attach a further page if needed.

Field	Most recent	Previous
Address		_____
Dates, from and to		_____
Owned or rented		_____
Landlord or mortgage holder		_____
Landlord or mortgage holder phone		_____

Field	Most recent	Previous
Reason for leaving		_____

Have you previously owned or lived in a unit in this association? ( ) yes ( ) no
If yes, unit and dates:

APPLICATION FOR APPROVAL OF PURCHASE OR TRANSFER, CONTINUED

Unit number:

IX. Everyone Who Will Live in the Unit

List every person who will reside in the unit, including every child.

Full name	Age	Relationship to applicant	Move-in date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total number of occupants: The occupancy limit for this unit is

Tell the association in writing within days when someone permanently joins or leaves this household.

X. Vehicles

Register every vehicle that will be parked on the property, including motorcycles.

Year	Make	Model	Color	Plate	State	Space
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Will you keep a boat, trailer, recreational vehicle, or commercial vehicle on the property? ( ) yes ( ) no
If yes, describe:
Number of parking decals or access devices requested:

XI. Pets and Animals

Pet rules for this association:
Where those rules appear:

( ) No animal will live in or regularly visit the unit.

( ) The following animals will live in or regularly visit the unit:

Animal 1: type breed name
Age Weight at maturity Color
Rabies tag number and expiry:

Animal 2: type breed name
Age Weight at maturity Color
Rabies tag number and expiry:

Attach a current rabies certificate, a current municipal license if one is required, and a photograph for each animal.

An assistance animal is not a pet and is not subject to the pet rules. Do not list an assistance animal above. Check the line below instead and the association will send you a reasonable accommodation request form within business days. Approval of this application does not depend on the outcome of that request.

( ) I intend to request a reasonable accommodation for an assistance animal.

XII. Emergency Contact and Access

Emergency contact name:
Relationship: Phone:
Alternate phone: Email:
Address:

Will you leave a key or access code with the association or its manager? ( ) yes ( ) no
If the unit will be vacant for long periods, the person authorized to enter it is:

Storm preparation required of owners:

XIII. Governing Documents

I have received, or have been given access to, current copies of the following, and I have had the opportunity to read them before signing:

( ) Declaration of condominium and all recorded amendments
( ) Articles of incorporation and all amendments
( ) Bylaws and all amendments
( ) Current rules and regulations
( ) Most recent annual financial statement
( ) Current annual budget
( ) Frequently asked questions and answers document
( ) Division governance form
( ) Milestone inspection report summary, if the association is required to have one
( ) Most recent structural integrity reserve study, or a statement that one has not been completed
( ) Turnover inspection report, if one was performed

I understand that these documents bind me, my household, my guests, and my tenants from the date I take title.

Applicant signature: Date:

XIV. Rental Restrictions

Current rental restrictions:
Adopted or last amended on:
Located at:

Applicant initials confirming receipt of the rental restrictions:

XV. Applicant Certification

I certify that:

1. Every statement in this application is true, complete, and accurate.
2. I have disclosed every person who will live in the unit.
3. A material misstatement or omission is grounds for revoking any approval issued in reliance on it, whether it is discovered before or after closing.
4. I authorize the association and its managing agent to verify anything stated here, including contacting the landlords and mortgage holders I have listed.
5. Approval of this application is not a statement by the association about the condition of the unit, the condition of the common elements, or the accuracy of anything said by the seller or a broker.
6. The association's review period runs from the date it receives a complete application.

Applicant signature: Printed name: Date:
_____

Co-applicant signature: Printed name: Date:
_____

XVI. Seller Acknowledgement

To be completed by the current owner of record.

I am the owner of record of unit _____. I certify that:

1. I have provided the purchaser, at my expense, with the documents a selling owner must provide under Florida law.
2. I have disclosed to the purchaser every open violation notice, unpaid assessment, unpaid fine, and pending special assessment affecting this unit that is known to me.
3. I understand that the purchaser is jointly and severally liable with me for unpaid assessments that came due up to the time title transfers, and that the amount owed to the association must be paid within 30 days after title transfers.
4. I authorize the association to give the purchaser, the purchaser's lender, and the closing agent the assessment status, violation history, and approval history of this unit.

Amounts I believe are currently owed on this unit:
Open violations I am aware of:

Seller signature: Printed name: Date:
_____

BACKGROUND SCREENING AUTHORIZATION

Print and sign one copy of this page for each occupant age 18 or older. Do not combine two adults on one page.

XVII. Background Screening Authorization

Unit number:
Applicant name:
Date of birth:
Current address:

I authorize and its screening company, to obtain and review the following in connection with my application:

( ) Credit report
( ) Criminal history records, within the limits stated below
( ) Eviction and civil judgment records
( ) Verification of the residence history I provided
( )

I understand that the report will be used only to evaluate this application, that it will be kept confidential, and that I may request a copy of any report on which a denial is based.

Signature: Printed name: Date:

Limits on the criminal history review:

- Only convictions are considered. An arrest that did not result in a conviction is not considered.
- Only convictions within the last years are considered.
- Only offenses bearing on the safety of residents or the security of property are considered. The categories reviewed are:
- A record within these limits is not an automatic denial. The association considers the nature and severity of the offense, the time that has passed, evidence of rehabilitation, and the applicant's history since.
- An applicant whose application is affected by a criminal history record is told so in writing and given a chance to respond before a final decision.

FOR ASSOCIATION USE ONLY

Unit number: Applicant name:

XVIII. Review Record

Event	Date	Recorded by
Application received		_____
Determined complete		_____
Missing items requested		_____
Missing items received		_____
Screening report received		_____
Reviewed by		_____
Decision sent to applicant		_____
Certificate of approval delivered		_____

XIX. Fee Check

Check	Result
Approval authority in the governing documents at	
Fee authority in the governing documents at	
Applicant count	
Fee charged	
Fee charged is at or under the current published ceiling	( ) yes
This is the renewal of a lease with the same lessee, so no fee may be charged	( ) not applicable ( ) yes

XX. Decision

( ) Approved, with no conditions.
( ) Approved with conditions, stated below. Conditions take effect on closing.
( ) Tabled. What is needed to decide, and by when, is stated below.
( ) Denied.

Conditions, if approved with conditions:

Condition 1:
Condition 2:
Condition 3:

Authority in the governing documents for each condition:

If tabled:

Information required:
Required by: Application will be reconsidered on:

If denied, complete both:

Provision of the declaration, articles, bylaws, or rules relied on:
The specific facts about this application that fail to satisfy that provision:
_____

Written notice of the denial and these reasons sent on:
Sent by: ( ) email ( ) certified mail ( ) hand delivery Tracking or confirmation:

Decided by: Title:
Vote: for against abstain

Signature: Date:

XXI. Estoppel Certificate Routing

An estoppel certificate is a separate document with its own deadline, its own fee, and its own contents. It is not part of this application and it is not covered by the transfer approval fee. Complete this record so that the approval file and the estoppel certificate for the same closing agree with each other. If the certificate is not delivered by the tenth business day after the request, no fee may be charged for it.

Estoppel request received on:
Received from:
Business day 10 falls on:
Expedited request: ( ) no ( ) yes, the third business day falls on
Delinquent amounts owed on the unit: ( ) no ( ) yes, amount
Fee charged:
Certificate issued and delivered on:
Delivery method: ( ) hand delivery ( ) regular mail ( ) email
Effective period ends:
Amended certificate issued: ( ) no ( ) yes, on

Answers carried from this application into the estoppel certificate:

Transfer approval answer at item 8.h.: ( ) approval required, approved ( ) approval required, not approved ( ) approval not required
Right of first refusal answer at item 8.i.: ( ) none exists ( ) exists, not exercised ( ) exists, exercised

Recorded by: Date:

CERTIFICATE OF APPROVAL OF TRANSFER

CERTIFICATE DATE:

certifies that the transfer of the unit described below has been reviewed under the association's governing documents and is approved.

Unit and address:
Parking or garage space:
Seller of record:
Approved purchaser or purchasers:
Approved occupants:
Date of approval:
Conditions of approval: ( ) none ( ) as stated below

Right of first refusal: ( ) none exists ( ) exists and was waived on ( ) exists and was exercised on

Conditions, if any:

This certificate expires on if the transfer has not closed by that date. If the transaction changes in any material way, including a change of purchaser, a change of occupants, or a change in how title will be held, this certificate is void and a new application is required.

This certificate covers the association's approval of the transfer only. It is not an estoppel certificate, it does not state the amounts owed on the unit, and it may not be relied on for the assessment status of the unit. An estoppel certificate must be requested separately.

Authorized signature:
Printed name and title:

Delivered to:

( ) Title company or closing agent, on by
( ) Buyer's agent, on by
( ) Listing agent, on by
( ) Purchaser, on by
( ) Seller, on by

Optional additions

The document above is complete as it stands. Use nothing on this page unless the situation described applies to your association.

If your declaration includes a right of first refusal

Complete this page for each transaction and keep it with the application file. The certificate of approval already carries the answer line; this page is the record behind that answer.

Right of first refusal appears at:
Held by: ( ) the association ( ) the members ( ) other:
Date the association received notice of the proposed sale:
Purchase price and material terms as presented:
Election period expires:
Notice circulated to members on:
Decision: ( ) waived ( ) exercised Date of the decision:
Vote or authority for the decision:
Written waiver or exercise delivered to the seller and closing agent on:

Recorded by: Date:
