

THE KNOLLS CONDOMINIUM ASSOCIATION, INC.

APPLICATION FOR CONSENT TO SELL, LEASE OR RENT PROPERTY

NOTE: An application fee of \$75.00 made payable to The Knolls Condominium Association, Inc. MUST ACCOMPANY THIS APPLICATION

Lease or Rent must submit a current agreement with the application

Please return to:

Progressive Community Management, Inc., 3701 South Osprey Avenue, Sarasota, Florida 34239.

Date: _____

Unit address _____

Owner _____

Address _____

City _____ State _____ Zip _____

Proposal To: _____ Buy _____ Rent _____ Lease

Name _____

Present address _____

Telephone number _____

Names, ages & relationship of all proposed in household:

Do you own or contemplate owning any household pet? _____

Do you own or contemplate owning a trailer, camper, R.V., boat, truck or motorcycle?

Present occupation of buyer, renter or lessee:

Bank references:

Other references:

Terms & period of lease (12 mo. Min. - No more than 6 units shall be leased at any one time)

Or sale price and terms

Closing date _____

THE KNOLLS CONDOMINIUM ASSOCIATION, INC.

* See restrictions in Declaration of Condominium, Article X

The proposed buyer/renter/lessee has read or has knowledge of the conditions in the USE RESTRICTIONS governing the sale/rental/lease of a unit in The Knolls of Bent Tree and agrees to abide by the conditions thereof and the regulations of The Knolls Condominium Association, Inc. As the potential new owner I acknowledge that I understand and will abide by the Knolls By-Laws stating that "cats and dogs are limited to two(2) or any combination thereof and are limited in size to twenty-five (25) lbs or less"

Proposed Buyer / Tenant

Proposed Buyer / Tenant

As a condition of approval by the Association, unit owner agrees to provide buyer/tenant with a copy of the recorded Declaration of Condominium, the By-Laws, the Articles of Incorporation and the respective amendments thereto, in addition to the Rules and Regulations.

Unit Owner

The undersigned designee of the Association has reviewed and evaluated the above application for purchase or lease of the unit and recommend as follows:

1. _____
Action

Association Manager

2. _____
Action

Association Manager

NOTE: This form must be received for approval ten days before lease begins or date of sale.

Processing Fee Received: _____
Date

I / We hereby authorize THE KNOLLS CONDOMINIUM ASSOCIATION, INC. to request a consumer report from consumer reporting agencies in considering this Application. I / We also understand that any information will be held in strict confidence. Upon applicant (s) request, we will inform the applicant (s) of the name and address of each consumer reporting agency from which we obtained a consumer report, if any, relating to applicant (s).

Print Name

Signature of Applicant

Print Name

Signature of Applicant

Current Address

City State Zip

Telephone Number

Social Security Number Date of Birth

(IMPORTANT NOTE: A copy of the purchase and sale agreement must accompany this application. If you have questions about completing the application or if you have not received a copy of the documents, contact the Board of Directors or

the management company.)

THE KNOLLS CONDOMINIUM ASSOCIATION, INC.

APPROVAL OF UNIT TRANSFER

STATE OF FLORIDA

COUNTY OF SARASOTA

THE KNOLLS CONDOMINIUM ASSOCIATION, INC., by its Board of Directors, does give its approval to:

_____ to acquire title to the following condominium unit:

UNIT #_____, THE KNOLLS, A CONDOMINIUM, AS PER DECLARATION OF CONDOMINIUM THEREOF RECORDED IN OFFICIAL RECORD BOOK 1254, PAGE 1791, ET SEQ., ALL BEING PUBLIC RECORDS OF SARASOTA COUNTY, FLORIDA.

Said approval is based upon the information submitted by the applicant and assumes its accuracy and truthfulness.

DONE AND EXECUTED this _____ day of _____, 20_____.

THE KNOLLS CONDOMINIUM ASSOCIATION, INC.

ATTEST:

BY: _____
Secretary

BY: _____
President