

Lake Vista Residences Condominium Association, Inc.

7703 Lake Vista Court
Lakewood Ranch, FL 34202

Application for Purchase

Return this application to the above address with a **non-refundable \$100.00 application fee payable to Lake Vista Residences Condominium Association Inc.** This application must be received 5 days prior to closing of the unit.

ALSO ATTACH \$500 REFUNDABLE MOVE IN DEPOSIT REQUIRED (TO BE RETURNED — PROVIDED NO DAMAGE TO COMMON AREAS)

The undersigned proposes to sell a Lake Vista Residences Condominium Unit No. _____
to _____ from _____ the proposed
closing day will be _____

Date _____ Owner Signature _____

Applicant	Co-Applicant
Name: _____	Name: _____
Address: _____	Address: _____
City/State/Zip Code: _____	City/State/Zip Code: _____
Local Phone: _____	Local Phone: _____
SS#: _____	SS#: _____
DOB: _____	DOB: _____
Email Address: _____	Email Address: _____
Driver's License #: _____	Driver's License #: _____

ATTACH A COPY OF EACH INDIVIDUAL APPLICANT(S) DRIVERS LICENSE(S).

Personal Reference: _____ Phone #: _____
Personal Reference: _____ Phone #: _____

Other Person(s) who will occupy the unit with you:

Name: _____ Age: _____ Relationship: _____
 Name: _____ Age: _____ Relationship: _____
 Name: _____ Age: _____ Relationship: _____
 Name: _____ Age: _____ Relationship: _____
 Name: _____ Age: _____ Relationship: _____

Pets: (Please review Pet Policy in Rules and Regulations)
Number _____ Type: _____ Weight: _____

Vehicle Information:
 Make: _____ Model: _____ Year: _____ State: _____ Tag: _____
 Vehicle Information:
 Make: _____ Model: _____ Year: _____ State: _____ Tag: _____

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Application for Approval of Purchase

- I. Has any proposed owner ever been convicted of a felony or a sex-related crime? _____
2. Has any proposed owner ever been convicted of any crime involving violence to persons or property? _____

Name of Real Estate Co.: (if any) _____ Phone: _____

I have received and read a copy of the Declaration of Condominium, the Articles of Incorporation, the Bylaws, Rules and Regulations and General Information, and the Frequently Asked Questions and Answer Sheet of the Lake Vista Residences Condominium Association, Inc. and understand my responsibilities as an owner, I agree to abide by the provisions of said documents.

Date signed: _____

Signature of Applicant for Sale _____

Telephone Number _____

AUTHORIZATION FOR VERIFICATION OF INFORMATION FOR CREDIT REPORT, PUBLIC RECORDS, RENTAL OR LEASE HISTORY AND EMPLOYMENT VERIFICATION,

This application must be received 5 days prior to closing date.

I do hereby authorize with my (our) signature(s) the release of public records, credit reports, rental or lease information and employment verification, whether by fax, verbal, photocopy or original signature, to Lake Vista Residences Condominium Association Inc. Board of Directors and all its members now and in the future.

I agree to hold harmless Lake Vista Condominium Association Inc. Board of Directors and all providers of information on the prospective owner(s) stated above. In the event that the information provided by me (us) is found to be misleading and/or false my acceptance for this purchase, whether determination is made before or after my date of sale, may be affected.

Date

Signature of Applicant

Date

Signature of Co-Applicant

___ Approved
___ Disapproved Date: _____

Director or Authorized Agent: _____