

Midnight Cove Association, Inc.

APPLICATION FOR SALE

RETURN COMPLETED APPLICATION ALONG WITH APPLICATION FEE TO:

Progressive Community Management, 3701 SOUTH OSPREY AVE, SARASOTA, FL 34239

PHONE: 941-921-5393

Unit Address/Unit # _____

Closing Date: _____

INSTRUCTIONS: Complete entire application, include a \$100 Non-Refundable application fee made payable to "Midnight Cove Association, Inc." Along with a copy of your Photo ID and a copy of your sales contract.

Buyer Information:

Name (Print) _____ **Date of Birth:** _____

Social Security # _____ **Driver's License No:** _____ **State Issued:** _____

Present Address: _____

Previous Address: _____

Spouse/Other (Print) _____ **Date of Birth:** _____

Social Security # _____ **Driver's License No:** _____ **State Issued:** _____

Present Address: _____

Previous Address: _____

Vehicle Information: How many: _____

Make: _____ **Model:** _____ **Year:** _____ **Tag#:** _____

Make: _____ **Model:** _____ **Year:** _____ **Tag#:** _____

Name of Real Estate Agent: _____

Contact number for Real Estate Agent: _____

Emergency Contact Person: _____ **Telephone#:** _____

Purpose of Purchase: Full-Time Residence ___ Part-Time Residence ___ Rent/Investment ___ Other ___

Names of Additional Persons to Occupy Premises (give ages if under 18):

1) _____ 2) _____ 3) _____

I/We have received and read a copy of all Rules and Regulations and understand my/our responsibilities as an owner/renter/occupant. I/We agree to abide by rules.

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

I agree to hold harmless, Progressive Community Management, Inc., and all providers of information on the prospective owner/tenant(s) stated above. In the event that the information provided by me (us) is found to be misleading or false, my acceptance for this sale/lease, whether determination is made before or after my date of ownership/occupancy, may be affected.

I do hereby authorize with my (our) signature(s), the release of public records, credit report, rental or lease information and employment verification, whether by fax, verbal, photocopy or original signature, to: Progressive Community Management, Inc., and all its members now and in the future for exclusive use of **Midnight Cove Association, Inc.**

Signature

Phone: _____

Date: _____

Signature

Phone: _____

Date: _____

Return to: Progressive Community Management, Inc., 3701 South Osprey Avenue, Sarasota, FL 34239 Office; (941)921-5393 Fax: (941)923-7000