SUMMER LAKES CONDOMINIUMS APPLICATION TO PURCHASE OR LEASE

This form must be completed, signed and returned to Prokop P.A., 2011 Bispham Rd, Sarasota, FL 34231, along with a <u>non-refundable check for \$100.00 payable to Summer Lakes. The Board must receive the application 10 days prior to closing for the Board to review. Approval is required prior to closing or <u>occupancy.</u></u>

| Date: | Change of Ownership: | | Rental Application: | |
|-----------------------------|--|----------------------|-------------------------------|--|
| Proposed Closing Date: | Lease Term: | to | | |
| Property Address: | | | Unit No: | |
| Applicant: | Co-Ap | plicant: | | |
| DOB: | DOB: | DOB: | | |
| Driver's License No. | Driver | Driver's License No. | | |
| Email Address: | Email | Email Address: | | |
| Present Address: | | | | |
| Phone: | Other | : | | |
| Employer: | Contact: | | Phone: | |
| Co-Applicant Employer: | Conta | act: | Phone: | |
| Children: | apy unit either permanent or part-ting Ages of Children: Occasional/Seasonal Reside | | must complete and application | |
| | l be allowed. <u>Weight restriction 25</u> | | : | |
| Automobiles: Make: | Year: | License Plate No: | State: | |
| Make: | Year: | License Plate No: | State: | |
| Personal Reference (Local i | if possible) | | | |
| Name: | | Phone No: | | |
| Address: | | | | |

- **Note:** 1. Pets exceeding 25lbs. at maturity are not permitted.
 - 2. Minimum rental period is three (3) months.
 - 3. Owners/renters must agree to sign and to abide by the Rules and Regulations of the Association. A copy will Be kept in your file.
 - 4. The Association is authorized up to ten (10) working days to process this application.
 - 5. The unit can only be occupied by those persons identified on the lease. Visitors who occupy a unit for more than two (2) weeks are considered a resident (family excluded) and must complete an application which includes a \$100.00 fee.

I/We (owner/lessee) have received and read the Rules and Regulations adopted by the Association and agree to abide by them. I understand that failure to abide by said Rules and Regulations could result in termination of lease. HAVE YOU EVER BEEN CONVICTED OF A CRIME, EXCLUDING MOTOR VEHICLE VIOLATIONS (TICKETS)? YES: _____ NO: _____ IF YES, WHEN AND WHERE: **IMPORTANT NOTICE TO PURCHASER/S:** By signing this application, purchaser/s are affirming that they have Received a copy of the Condominium Documents from your real estate agent or seller. This is a requirement by Florida Law. If one is not available, a copy can be obtained from the management company at a cost of \$75.00. Purchaser/s agree that the above information is true and correct. Co-Applicant Signature Applicant Signature Date Date At the Closing, please obtain a copy of the Warranty Deed or the Certificate of Title and send to Prokop, P.A. This documentation is necessary to change the account to your name. Approved by the Board of Directors: By: ______ Title: _____ Date: _____ Disapproved by the Board of Directors: By: ______ Title: _____ Date: _____