

NOTICE OF INTENT TO SELL

ACCOUNT NO. _____

ASSOCIATION NAME _____

DATE _____, 19____

UNIT NUMBER/ADDRESS _____

PROPERTY OWNER NAME _____

This Notice of Intent to Sell and a fully executed copy of the related sales contract must be accompanied by a check in the amount of \$ _____ made payable to the Association and returned to the Association's Board of Directors, Closing Department, 2180 West State Road 434, Suite 5000, Longwood, Florida 32779.

THIS SECTION TO BE COMPLETED BY SELLER

In compliance with the Declaration of Covenants and Restrictions of the Association named above, I (we) hereby serve notice that, as Owner (s) or Agent of the above referenced unit, I (we) intend to offer said unit for sale in accordance with the attached Contract for Sale.

Unless I am notified to the contrary within _____ days from the receipt of this completed notice and attachment, I will advise Purchaser that the proposed sale has been approved.

OWNER'S SIGNATURE _____

OWNER'S SIGNATURE _____

PLEASE PRINT NAME _____

PLEASE PRINT NAME _____

PHONE NUMBER _____ H _____ O _____

MAILING ADDRESS _____

FOR RESPONSE _____

**THIS SECTION TO BE COMPLETED BY PURCHASER
THE BOARD WILL NOT ACCEPT PARTIALLY COMPLETED FORMS**

I (We) intend to purchase unit number/address _____

I (We) are aware that any falsification or misrepresentation of the information contained herein will result in an automatic rejection of this application.

I (We) acknowledge and understand that the property offered for sale is governed by deed restrictions and Rules and Regulations, which are applicable to both the Unit and Common Property, and which may be amended from time to time by the Association named above. I (We) agree to abide by such deed restrictions and rules and regulations.

I (We) are purchasing this property with the intention to: (Check one)

1. Reside as owners on a full-time basis ☐
2. Reside as owners on a part-time basis ☐
3. Lease the property ☐

I (We) consent that you may make further inquiry concerning this application, particularly of the references given below.

PURCHASER: (1) _____ SS# _____

OCCUPATION: _____ HOW LONG? _____

EMPLOYER: _____ PHONE # _____

PURCHASER: (2) _____ SS# _____

OCCUPATION: _____ HOW LONG? _____

EMPLOYER: _____ PHONE # _____

CURRENT HOME ADDRESS: _____

PHONE NUMBER: _____ HOW LONG? _____

NAME AND ADDRESS OF PRESENT LANDLORD OR MORTGAGE COMPANY: _____

PHONE # _____

MONTHLY MORTGAGE OR RENTAL PAYMENT: \$ _____

UNITS ARE FOR SINGLE-FAMILY RESIDENCE USE ONLY. THE FOLLOWING PERSON (S),
IN ADDITION TO PURCHASER WILL OCCUPY THE UNIT:

NAME: _____ RELATIONSHIP: _____

NAME: _____ RELATIONSHIP: _____

THE FOLLOWING PET(S) WILL OCCUPY THE UNIT:

TYPE: _____ WEIGHT: _____

TYPE: _____ WEIGHT: _____

LIST TWO (2) PERSONAL REFERENCES (LOCAL, IF POSSIBLE):

NAME: _____ ADDRESS: _____ PHONE: _____

NAME: _____ ADDRESS: _____ PHONE: _____

BANK REFERENCES:

BRANCH NAME/ADDRESS: _____ PHONE: _____

BRANCH NAME/ADDRESS: _____ PHONE: _____

AUTOMOBILE/VEHICLE INFORMATION:

MAKE: _____ MODEL: _____ YEAR: _____ TAG #: _____

MAKE: _____ MODEL: _____ YEAR: _____ TAG #: _____

PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

NAME: _____ ADDRESS: _____ PHONE: _____

CLOSING INFORMATION:

DATE OF CLOSING _____

NAME OF CLOSING AGENT _____ PHONE: _____

NAME OF REAL ESTATE AGENT _____ PHONE: _____

Dated this _____ day of _____, 19 ____.

SIGNED _____
PURCHASER

SIGNED _____
PURCHASER

THIS SECTION FOR ASSOCIATION USE ONLY

Processing fee received \$ _____

Sales Contract attached: YES /____/ NO /____/

Approved: /____/ Disapproved: /____/

Date: _____, 19 ____

By: _____ Title: _____

NOTES: _____