

APPLICATION FOR PURCHASE SOUTH PASSAGE CONDOMINIUM ASSOCIATION, INC.

NOTE: This application must be accompanied by a **copy of the Real Estate Sales Contract** and a **processing fee of \$120.00, inclusive of a background check**. Please make check payable to: *South Passage Association, Inc.* **Please allow up to thirty (30) days for approval process.**

Date: _____

I hereby submit the following information for consideration by the Board of Directors and allow my name, unit number, email address and phone to be listed in the Association directory:

Unit No. _____ Current Owner's Name: _____

Name of Applicant: _____ Date of Birth: _____ SSN: _____

Email Address: _____ Cell Phone: _____

Present or Former Occupation: _____

Business Address: _____

Applicant's Birthplace: _____
City State

Name of Co-Applicant _____ Date of Birth: _____ SSN: _____

Email Address: _____ Cell Phone: _____

Present or Former Occupation: _____

Business Address: _____

Applicant's Birthplace: _____
City State

Present Residential Address: _____

City State Zip Telephone: _____

Intent of Ownership: _____ full time _____ part-time _____ investment

Number of Children under 21: _____ Ages: _____

Pets (Y or N): _____ Total #: _____ Type: _____ Weight (if dog): _____

APPLICATION FOR PURCHASE

Applicant's Club Affiliations (past and present):

1. _____
Name City State Telephone

2. _____
Name City State Telephone

Co-Applicant's Club Affiliations (past and present):

1. _____
Name City State Telephone

2. _____
Name City State Telephone

Current or Most Recent Homeowners or Condominium Association Membership:

1. _____
Association Name Name of Person on Board Telephone

2. _____
Association Name Name of Person on Board Telephone

Personal References: (not relatives and local residents, if possible)

1. _____
Name Street City/State/Zip Telephone

2. _____
Name Street City/State/Zip Telephone

Business References:

1. _____
Name Street City/State/Zip Telephone

2. _____
Name Street City/State/Zip Telephone

YOU ARE HEREBY AUTHORIZED TO CONTACT ANY OF THE ABOVE FOR THE PURPOSE OF ACTING ON THE APPLICATION. AND I GIVE MY FULL AUTHORIZATION TO OBTAIN MY CRIMINAL HISTORY RECORD

Applicant's Signature

Co-Applicant's Signature

Rev 4/15/2016

**APPLICATION FOR PURCHASE
ACKNOWLEDGMENT OF RECEIPT AND COMPLIANCE AGREEMENT
*SOUTH PASSAGE ASSOCIATION, INC.***

I have read, understand and agree to abide by the terms and provisions of the Declaration of Condominium establishing *South Passage*, the Articles of Incorporation and the By-Laws of *South Passage Association, Inc.*, and the Rules and Regulations **as amended from time to time** and adopted pursuant to these documents.

Please initial the following rules, thereby indicating that you understand and agree to abide by these rules (specific details for each are found in attached documents):

- ____ Pickup trucks are not permitted to be parked overnight and campers, trailers, trucks, motorized boats, and motor homes shall not be parked on Association grounds.
- ____ No motorcycles, mini-bikes, all terrain vehicles, or golf carts are permitted on the Association grounds at any time.
- ____ Cars should be parked facing in.
- ____ Only one dog and only dogs under 35 pounds are permitted and only then if permission is granted by the unit owner.
- ____ Boats generally may not exceed 12 feet of height above the water line nor be longer than 41 overall feet and docks may only be used by the renter.
- ____ Permission is given for South Passage Condominium Association to do credit and criminal background checks.
- ____ In consideration of your neighbors during the "season" the Board requests that major remodeling work be scheduled only between May 1 and December 1.
- ____ All rentals of a Unit must be a minimum of two months and require Board approval.

Please sign below as acknowledgment of receipt and agreement to comply with the policies set forth in the documents described above.

Applicant's Signature

Co-Applicant's Signature

For Association Secretary's Use Only

Application received on the _____ day of _____, 20____

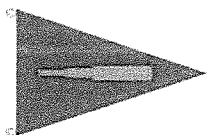
Date of Interview: _____ Date Approved: _____

Names of Interviewers: _____

Approved by the Board of Directors: _____

Signature

Title



SOUTH PASSAGE ASSOCIATION, INC.
Pet Application

Unit Owner/Lessee Name _____

Unit # _____

Telephone _____

Email Address _____

Description of Animal:

Age of Pet _____

Weight _____

Breed _____

Sex _____ Name _____

Please return a picture of the animal with this application.

I/We have read and understand the Rules and Regulations and the Declaration of Condominium of South Passage Association, Inc. and agree to abide by the covenants therein, including keeping the pet under control while outside the unit, cleaning up after the pet, not taking the pet in the pool area or in the clubhouse, and making sure that the pet is not a nuisance to other residents. We understand that if the pet is a nuisance that the board may withdraw permission for the animal to be on the grounds of South Passage and that the board may vote to have the animal removed with three days notice.

Unit Owner/Lessee Signature

Date

Association Use Only – Below

Date received _____

Date Approved/Not Approved _____

By _____

Title _____

By: _____

Title _____