The Strand of Sarasota Condominium Association Inc. 1705 N Tamiami Trail Sarasota FL 34234

email: info@thestrandofsarasota.com

BUYER APPLICATION

I (we) the undersigned hereby apply to be a condominium owner at The Strand of Sarasota Condominium Association. I (we) submit the following with the understanding that the Association intends to rely upon the information, representations and agreements herein. A COPY OF THE PURCHASE CONTRACT AND A CHECK FOR \$100 MUST ACCOMPANY THIS APPLICATION.

Seller:	
I. <u>Buyer Information</u>	
Unit <u>#:</u>	
Name:	Date of Birth: (MM/DD/YY)
Occupation:	
Name:	Date of Birth: (MM/DD/YY)
Occupation:	
Primary Address:	
Contact Information:	Cell Number:
Work Number:	E-mail Address:
☐ Yes, I want to receive important community i ☐ No, I do not want to receive important commu Contact Person (in case of emergency)	unity information about The Strand via E-Mail.
Name: Phone Number:	
Children: Name: Name:	Age: Age: Age: Age:
II. <u>Credit References</u> Name:	
Company:	
Address: Name: Company:	Phone Number:
Address:	

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III.I have reviewed the Declaration of Condominium, the Articles of Incorporation, the By-Laws and all present and proposed Rules and Regulations of the association and if accepted into the condominium as owner(s) upon approval of sale agree to abide by these documents.

IV. In addition to the above, I (we) agree if I (we) become owners that I (we) will:

Copy of Deed Received: Yes No

- a. Pay all assessments, fees and charges that are duly submitted to me (us).
- b. Indemnify the Association for any violation of this agreement or of the documents identified above, and for nonpayment of any funds owing for charges, assessments, etc., including any costs to the association for legal fees and court costs to require compliance and to collect fees, charges, assessments and fines.
- c. Comply with all rules, regulations and laws now in existence or hereinafter declared as promulgated pertaining to my ownership and use of the condominium.
- d. I (we) will keep our unit fully insured for liability and hazard insurance.

V. Realtor Information			
Name:	Phone	Number:	
~	E-mail Address:		
VI. Closing Date			
Expected Date:	Sai	es Price:	
VII. Mortgage/ Financing In	<u>formation</u>		
Company:	Loan Agent	Name:	
Address:			
Phone Number:	E-mail Add	ress:	
·	ot transfer this unit to other persons wit ed herein is true and correct and given u		
X. All the information contained the thing of the thing o	-	nder the penalty of unswe	orn falsification. Rental
X. All the information contained the thing of the thing o	ed herein is true and correct and given u property as a (select one): Permanen pplication (agreement) to be executed or	nder the penalty of unswe	orn falsification. Rental Seasonal Rental .
X. All the information contained the thing of the thing o	ed herein is true and correct and given u property as a (select one): Permanen pplication (agreement) to be executed or Applicant Signature: Applicant Signature:	nder the penalty of unswert Residence	orn falsification. Rental
X. All the information contained that this time, I intend to use this (we) hereby have caused this a fall proposed owners must sign and	ed herein is true and correct and given u property as a (select one): Permanen pplication (agreement) to be executed or Applicant Signature: Applicant Signature:	nder the penalty of unswer	orn falsification. Rental

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Page 2 Background Check Authorization

Name:	
S:-1 S:	
Social Security #:	
Date of Birth:	
I authorize background reports such as criminal, sexual predator/violent offender, civil records, driving, "most wanted", terrorist links, social security number verification, adother reports to be obtained on me for the results of the reports to be provided to the peorganization requesting them.	dress history and/or
Signature:	