

South Park Condominium Association, Inc.

APPLICATION FOR PURCHASE

Please print all information

NOTE: This Application will not be considered unless it is filled in completely and submitted to SOUTH PARK CONDOMINIUMS, INC. thirty days prior to closing. **This Application must be signed by all parties to the sale**, or it will be returned without approval. The purchase is not approved until this procedure is completed, and approval is granted (within ten days of receipt of completed Application and fee).

REQUIREMENTS:

Return copy of Application and \$50.00 application fee **PER ADULT**, with a check made payable to 'South Park Condominium' c/o **Blue Ribbon Property Management**, 2406 State Road 60 East #1383 Valrico, FL 33595-1383

Name of Buyer(s): _____

Phone: (H) _____ (W) _____ (C) _____

Property Address: _____

Email Address: _____

Buyer's Name: _____ DOB: _____ SSN: _____

CO Buyer: _____ DOB: _____ SSN: _____

Additional Adult _____ DOB: _____ SSN: _____

Current Address: _____ How Long? _____

Landlord/Mortgage Holder Name on Previous Address: _____

Address: _____ Phone: _____

Vehicle Make: _____ Model: _____ Color: _____ Year: _____ Tag# _____ State: _____

Vehicle Make: _____ Model: _____ Color: _____ Year: _____ Tag#: _____ State: _____

*No Commercial trucks or vehicles, RV's, boats or trailers*** (Please see Declaration of Covenants for specifics.)

PLEASE NOTE: GATES CANNOT ACCOMMODATE LARGE MOVING VANS (i.e. 18 wheelers)

Pet: Dog/Cat Breed: _____ Other: (Specify Type) _____ Weight: _____ lbs. Age: _____

(Only one dog, under 20 pounds, or cat permitted. See Declaration of Covenants for specific restrictions)

Name/Relationship of Permanent Occupants Not Listed Above:

_____ DOB: _____ SSN: _____

_____ DOB: _____ SSN: _____

Buyer's Current Employer: _____ Occupation: _____ How Long? _____

Address: _____ Phone#: _____

In case of Emergency, please contact:

Name: _____ Relationship _____ Phone#: _____ E-Mail: _____

Your signature authorizes Management to secure a credit report and other pertinent background information deemed necessary. Such information may be forwarded to the Board of Directors. It also acknowledges receipt of the Rules & Regulations, and the Frequently Asked Questions & Answers Sheet.

I hereby acknowledge and affirm that this information is true and accurate, to the best of my knowledge.

Applicant's Signature _____ Co-Applicant _____ Date _____

Property Owner's Signature _____ Co-Owner _____ Date _____

Signature of Purchaser(s) acknowledge(s) that you have received, read, understand, and will abide by the Declaration of Covenants, Conditions, Restrictions and Easements, the "RULES & REGULATIONS", the Association Basics Document, and the requirements regarding Additional Persons and Single Family residence.

(Approved) or (Disapproved) by: _____ Date _____

SOUTH PARK CONDOMINIUMS, INC.

2406 State Road 60 East #1383 Valrico, FL 33595-1383