

\_\_\_\_\_ **AT TARPON BAY CONDOMINIUM ASSOCIATION, INC.**

**SALES APPLICATION**

The undersigned hereby makes an application to purchase the following property:

Address: \_\_\_\_\_

**Sellers Name:** \_\_\_\_\_

Anticipated closing date of \_\_\_\_\_ at a sale price of \$ \_\_\_\_\_

**Required Information:**

Legal Name \_\_\_\_\_

Co-Applicant Legal Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Date of Birth \_\_\_\_\_

Social Security # \_\_\_\_\_

Social Security # \_\_\_\_\_

Email Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_

Cell Phone ( ) \_\_\_\_\_

Cell Phone ( ) \_\_\_\_\_

Name(s) and Birth Dates of Dependent(s)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE: ALL PROPOSED OCCUPANTS WITH RELEVANT INFORMATION MUST BE LISTED—USE ADDITIONAL SHEETS IF NECESSARY.**

Pets   
Breed \_\_\_\_\_  
Name \_\_\_\_\_

**PLEASE GIVE RESIDENTIAL INFORMATION**

Current Address \_\_\_\_\_  
Apt # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Co-applicant Current Address (if not the same) \_\_\_\_\_  
Apt # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Month/Year Moved-In \_\_\_\_\_ Reasons for Leaving \_\_\_\_\_

Owned/Rent \_\_\_\_\_ Owner/Agent \_\_\_\_\_  
Phone ( \_\_\_\_\_ ) \_\_\_\_\_

**PLEASE DESCRIBE YOUR CREDIT HISTORY**

Have you declared bankruptcy in the past seven (7) years? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been evicted from a rental residence? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you had two or more late mortgage/ rental payments in the past year? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever willfully or intentionally refused to pay mortgage/rent when due? Yes \_\_\_\_\_ No \_\_\_\_\_

**Criminal History**

Have any of the proposed occupants listed above ever been: convicted of a felony?  
\_\_\_\_\_ YES \_\_\_\_\_ NO

Please list the names, dates of birth of each occupant that has been so convicted:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IF YES; please give dates, jurisdiction, type of offenses, sentences and a brief explanation of each offense:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(add additional sheets if necessary)

**PLEASE PROVIDE YOUR EMPLOYMENT INFORMATION**

Your Status: \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Student \_\_\_\_\_ Unemployed \_\_\_\_\_ Retired

Employer \_\_\_\_\_

Dates employed \_\_\_\_\_ Employed as \_\_\_\_\_

Supervisor Name \_\_\_\_\_ Phone ( \_\_\_\_\_ )

Salary \$ \_\_\_\_\_ per: \_\_\_\_\_. (If employed by above less than 12 months, give name & phone of previous employer or school: \_\_\_\_\_.)

If you have other sources of income that you would like us to consider, please list income, source, and person (banker, employer, etc.) who we may contact for confirmation. You do not have to reveal alimony, child support, or spouse's annual income unless you want us to consider it in this application.

Amount \$ \_\_\_\_\_ Source/Contact Name \_\_\_\_\_

**PLEASE LIST THE FOLLOWING INFORMATION**

**Emergency Contact:**

Name \_\_\_\_\_ Email \_\_\_\_\_  
Phone \_\_\_\_\_ Relationship \_\_\_\_\_

**Applicant's Driver's License:** \_\_\_\_\_ **State** \_\_\_\_\_

**Co-Applicant's Driver's License Number:** \_\_\_\_\_ **State** \_\_\_\_\_

**Vehicle Information:**

Make / Model \_\_\_\_\_ Year \_\_\_\_\_ State & License Plate \_\_\_\_\_  
Make/ Model \_\_\_\_\_ Year \_\_\_\_\_ State & License Plate \_\_\_\_\_

**ADDITIONAL INFORMATION:**

Please give any additional information that might help owner/management evaluate this application?

Occupancy: Full \_\_\_\_\_ Part \_\_\_\_\_ Seasonal \_\_\_\_\_ Investor \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Where may we reach you to discuss this application?

Day Phone # ( \_\_\_\_\_ ) Night Phone # ( \_\_\_\_\_ )

◆ The above listed applicant declares that all statements made in this application are true and complete. Applicant hereby authorizes the \_\_\_\_\_ AT TARPON BAY CONDOMINIUM ASSOCIATION, INC. to verify all of the information in this application and obtain Criminal background reports on the above listed applicants and all proposed adult occupants. If applicant or co-applicant has given any false information, owner and/or the condominium association is entitled to reject the application and retain all application fees as liquidated damages for owner's and/or condominium's time and expenses in processing this application. Applicant shall give owner a nonrefundable application fee in the amount of **\$150.00** payable to sub-association:

**AT TARPON BAY CONDOMINIUM ASSOCIATION,  
2050 CASTAWAYS COURT, NAPLES, FL 34119. \*\* PLEASE NOTE FOR INTERNATIONAL APPLICANTS  
PLEASE CONTACT THE OFFICE FOR THE FEE.**

◆ I/we warrant that all statements above set forth are true; however, should any statement made above be a misrepresentation or not a true statement of facts, the sale may be considered null and void and the owner and/or the association may require.

◆ If the application is not approved or accepted by the condominium association, the applicant hereby waives any claim for damages by reason of non-acceptance by the association. I/we recognize that as a part of your procedure for processing my application, an investigative consumer report and criminal information background check may be prepared whereby information is obtained through personal interviews with others with whom I may be acquainted. This inquiry includes information as to my/our character, general reputation, personal characteristics, and mode of living.

◆ The above information, to the best of my/our knowledge, is true and correct.

Please sign:

X \_\_\_\_\_ X \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

Date \_\_\_\_\_ Date \_\_\_\_\_

**AUTHORIZATION  
Release of Information**

I/WE authorize an investigation of ownership/tenant history, employment, criminal Background for the purposes of purchasing a condominium from this owner.

X \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Name (please print)

X \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Name (please print)

**This application must be submitted in full to the association address as herein listed, with a copy of the proposed sales agreement, a signed and initialed copy of the rules and regulations of the association, three letters of reference and a non-refundable application fee of \$150.00 made out to \_\_\_\_\_ at Tarpon Bay Condominium Association, Inc. at least fifteen (15) days prior to the proposed closing in accordance with the sales agreement.**

---

**APPLICANT: PLEASE DO NOT WRITE BELOW (FOR OFFICE USE ONLY)**

Received by \_\_\_\_\_ Application Fee: \_\_\_\_\_

Date \_\_\_\_\_

**APPLICATION VERIFICATION**

Proposed Sales Agreement: \_\_\_\_\_ Signed copy of rules: \_\_\_\_\_

Application Fee: \_\_\_\_\_ References \_\_\_\_\_

CRIMINAL BACKGROUND CHECKS ( all adult occupants) \_\_\_\_\_