**CINNAMON COVE SINGLE FAMILY II CONDOMINIUM ASSOCIATION, INC.**

Sandcastle Property Management

16266 San Carlos Blvd, Suite 10

Fort Myers, Florida 33908

Phone: 239-466-3330 \*\* Fax: 239-443-4572

[administrator@sandcastlepmb.com](mailto:administrator@sandcastlepmb.com)

[www.sandcastlepmb.com](http://www.sandcastlepmb.com)

**NOTICE OF PURCHASE APPLICATION**

**This form must be submitted to Sandcastle Property Management**

**at least (15) days prior to the closing date.**

**$100 MANAGEMENT PROCESSING FEE PAYABLE TO SANDCASTLE PROPERTY MANAGEMENT**

DATE: \_\_\_\_\_\_PROPERTY ADDRESS: \_\_\_\_­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NUMBER OF PEOPLE TO OCCUPY THE UNIT: \_\_\_\_\_\_\_\_

RESIDENCY: \_\_\_\_\_\_ PERMANENT \_\_\_\_\_\_ SEASONAL

BUYER INFORMATION:

NAME: ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DRIVER’S LICENSE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OTHER OCCUPANTS:

NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ RELATIONSHIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AGE: \_\_\_\_ DOB: \_\_\_\_\_\_\_\_

NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ RELATIONSHIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AGE: \_\_\_\_ DOB: \_\_\_\_\_\_\_\_

NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ RELATIONSHIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AGE: \_\_\_\_ DOB: \_\_\_\_\_\_\_\_

NAME OF CURRENT OWNER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF REALTOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TELEPHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF CLOSING AGENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TELEPHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PETS: \_\_\_\_\_\_Y \_\_\_\_\_\_N **(ONLY ONE PET IS PERMITTED)**

BREED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_NAME:\_\_\_\_\_\_\_\_\_\_\_AGE:\_\_\_\_\_\_\_\_SIZE (LBS):\_\_\_\_\_\_

IN CASE OF EMERGENCY NOTIFY:

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS AFTER CLOSING FOR MAILING PURPOSES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE: \_\_\_\_\_\_\_\_\_\_\_\_ ZIP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PERSONAL INFORMATION

VEHICLE TYPE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COLOR \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TAG \_\_\_\_\_\_\_\_\_\_\_\_\_\_

VEHICLE TYPE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COLOR \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TAG \_\_\_\_\_\_\_\_\_\_\_\_\_\_

THE MANAGER IS AVAILABLE TO ANSWER ANY QUESTIONS REGARDING THE RULES AND REGULATIONS THAT GOVERNTHE ASSOCIATION. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT HIM/HER PRIOR TO SIGNING THIS APPLICATION FOR OCCUPANCY.

I (WE) HAVE RECEIVED, READ AND UNDERSTAND THE ASSOCIATION’S DOCUMENTS AND RULES AND REGULATIONS. I (WE) AGREE TO ABIDE BY ALL OF THE PROVISIONS AND THOSE OF OTHER RECORDED DOCUMENTS AND BY ALL RULES AND REGULATIONS MADE PURSUANT THERETO.

THERE ARE CERTAIN LIMITATIONS REGARDINGTHE USE OF EACH RESIDENTIAL UNIT AND THE COMMON ELEMENTS. IT IS YOUR RESPONSIBILITY TO KNOW THE RESTRICTIONS AND COMPLY WITH ALL RULES AND REGULATIONS CONTAINED IN THE ASSOCIATION’S DOCUMENTS. YOU MUST OBTAIN, READ AND UNDERSTAND ALL THE ARTICLES OF INCORPORATION; DECLARATIONS; BYLAWS; RULES AND REGULATIONS AND ANY AMENDMENTS FROM THE SELLER, PRIOR TO SIGNING THIS DOCUMENT.

I (WE) UNDERSTAND AND WILL COMPLY WITH ALL RULES AND REGULATIONS OF THE ASSOCIATION.

AS REQUIRED BY LAW, THIS INFORMATION IS KEPT STRICTLY CONFIDENTIAL.

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APPLICANT CO-APPLICANT

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

DATE