

**Hideaway Bay Beach Club Condominium Association, Inc.  
c/o Star Hospitality Management  
26530 Mallard Way, Punta Gorda, FL 33950**

**UNIT PURCHASE INFORMATION \_\_\_\_\_**

**SHEET**

**Attached you will find:**

- 1. Buyer Application**
- 2. Frequently Asked Questions**
- 3. Rules and Regulations**
- 4. Renter/Guest Ferry Pass**
- 5. Homeowner Information Sheet**

**For Buyer's approval submit the completed Buyer Application, a copy of the Contract and a check for \$100.00, made out to Hideaway Bay Beach Club Condominium Association, Inc. to the address listed above.**

**For an Estoppel Letter email to: Roxanne Runyan at [r.runyan@starhospitalitymanagement.com](mailto:r.runyan@starhospitalitymanagement.com)**

**Return Homeowner Information Sheet to the address on the letterhead before closing.**

**Inform the Seller that they are to contact Leslie Phillips after the closing.**

**Ownership for the unit cannot be changed without a copy of the Warranty Deed. Please mail to the address on letterhead as soon as possible after closing.**

**After closing, please have the Buyer contact the Manager for information regarding the Association Website.**

**For any questions, please contact the Manager, Leslie Phillips of HBBC at:**

**Star Hospitality Management  
26530 Mallard Way, Punta Gorda, FL 33950  
Phone: 941-575-6764  
E-mail address: [l.phillips@starhospitalitymanagement.com](mailto:l.phillips@starhospitalitymanagement.com)**

**HIDEAWAY BAY BEACH CLUB CONDOMINIUM ASSOCIATION, INC.  
Buyer's Application**

Unit #: \_\_\_\_\_

Name of Buyer (Applicant): \_\_\_\_\_

Phone: \_\_\_\_\_

Co-Applicant Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Driver License: \_\_\_\_\_ State: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone 14: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Names of Occupants: \_\_\_\_\_

**VEHICLE INFORMATION:**

Type and Make: \_\_\_\_\_ License #: \_\_\_\_\_

**BOAT INFORMATION:**

Type and Make: \_\_\_\_\_ Registration #: \_\_\_\_\_

*Attach copy of Proof of Insurance to this application.*

**PERSONAL REFERENCES:** Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**CLOSING DATE:** \_\_\_\_\_

**CLOSING AGENT NAME & PHONE #:** \_\_\_\_\_

**\*\*\*THE ASSOCIATION CANNOT REGISTER THE CHANGE IN OWNERSHIP  
WITHOUT COPY OF THE WARRANTY DEED. \*\*\***

PLEASE MAIL A COPY AS SOON AS AVAILABLE TO:

Star Hospitality Management at 26530 Mallard Way, Punta Gorda, FL 33950

EACH APPLICATION MUST BE COMPLETED IN ITS ENTIRETY.  
AN INCOMPLETE APPLICATION WILL NOT BE CONSIDERED.  
COPY OF THE CONTRACT MUST BE ATTACHED TO THE APPLICATION.

I understand that upon receipt of a totally completed and executed application, including a copy of the contract and the transfer fee, the Association has 15 days within which to accept or reject the application. \_\_\_\_\_

(Buyer's Initials)

I have received the Rules and Regulations of Hideaway Bay Beach Club Condominium Association, Inc. \_\_\_\_\_

(Buyer's Initials)

I and all persons occupying this unit have carefully read and will fully comply with all the Rules and Regulations of Hideaway Bay Beach Club Condominium Association, Inc.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Please complete the Owner Information Sheet and return it to the Association before closing.

The undersigned owner(s) of said unit join in the application to request the Association review same and verify that to the best of their knowledge all information contained in the application is current and accurate.

\_\_\_\_\_  
Signature of Current Owner                      Date

The undersigned Realtor handling the sale of "Unit \_\_\_\_\_" joins in the application to request the Association to review same and verify to the best of his/her knowledge that all information contained in the application is current and accurate.

\_\_\_\_\_  
Name & Phone # of Realtor                      Signature of Realtor                      Date  
Please return application to:                      Hideaway Bay Beach Club Condominium Association, Inc.  
Star Hospitality Management  
26530 Mallard Way,  
Punta Gorda, FL 33950

Approval for Sale:      Yes \_\_\_\_\_ No \_\_\_\_\_

Signature of Association Representative: \_\_\_\_\_ Date: \_\_\_\_\_