

HIDEAWAY BAY BEACH CLUB CONDOMINIUM ASSOCIATION, INC.

Buyer's Application

Unit #: _____

Name of Buyer (Applicant): _____ Phone *11*: _____

Co-Applicant Name: _____ Phone #: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Driver License #: _____ State: _____

Employer: _____ Phone _____

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 *it*: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Name: _____ Phone #: _____

Address: _____

City: _____ State: _____ Zip Code: _____

CLOSING DATE: _____

CLOSING AGENT NAME & ADDRESS: _____

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

PLEASE MAIL A COPY OF WARRANT DEED AS SOON AS AVAILABLE TO:

Sunstate Management Group; P.O. Box 18809; Sarasota, FL 34276

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

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 verifies 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.
c/o Sunstate Management Group
P.O. Box 18809
Sarasota, FL 34276

Approval for Sale: Yes _____ No _____

Signature of Association Representative: _____ **Date:** _____