

Summerside Association, Inc.
c/o Gulf Coast Community Management
9040 Town Center Parkway
Lakewood Ranch, FL 34202

Phone: (941) 870-5600 - Fax: (941) 467-3441 - Email: Bill@GulfCoastCM.com

Application for Purchase/Lease

Note: A fee of \$100.00 payable to Summerside Association, Inc. must accompany this application and be forwarded to the above address.

This form must be completed by the proposed buyers or tenants and submitted to the Summerside Association Board of Directors for approval no less than ten (10) days prior to the lease or purchase date.

UNIT ADDRESS: _____

CURRENT OWNERS NAME: _____

CLOSING DATE OR RENTAL PERIOD (as applicable): _____

AGENT'S NAME (as applicable): _____ PHONE # _____

FIRST APPLICANT PROSPECTIVE BUYER OR TENANT (circle one):

NAME: _____ DOB: _____ SS#: _____

MARITAL STATUS: _____ PHONE # _____ DRIVERS LICENSE # _____

PRESENT ADDRESS: _____ HOW LONG: _____

PRESENT LANDLORD: _____ PHONE # _____

OCCUPATION: _____ HOW LONG: _____

BUSINESS NAME: _____ BUS PHONE _____

EMAIL: _____

SECOND APPLICANT PROSPECTIVE BUYER OR TENANT (circle one):

NAME: _____ DOB: _____ SS#: _____

MARITAL STATUS: _____ PHONE # _____ DRIVERS LICENSE # _____

PRESENT ADDRESS: _____ HOW LONG: _____

PRESENT LANDLORD: _____ PHONE # _____

OCCUPATION: _____ HOW LONG: _____

BUSINESS NAME: _____ BUS PHONE _____

EMAIL: _____

WILL ANY OCCUPANT HAVE A PET IN THE UNIT? (DOG, CAT, ETC) YES / NO (circle one) (*One cat or one small dog is allowed, not exceeding 15 inches in height*)

BREED _____ TYPICAL WEIGHT (AT MATURITY) _____ LB.

Is the prospective tenant a service member defined in s.250.01 Florida Statutes to include any person on active duty with the U.S. Armed Forces or state active duty and all members of the Florida National Guard and U.S. Reserve Forces? _____ Yes _____ No

OTHER PERSONS WHO WILL OCCUPY THIS UNIT WITH YOU:

NAME: _____ RELATIONSHIP: _____

DOB: _____ SS# (if over 18): _____ DL# _____

NAME: _____ RELATIONSHIP: _____

DOB: _____ SS# (if over 18): _____ DL# _____

VEHICLES: (Commercial vehicles, boats, trailers, or campers cannot be stored or parked.)

AUTOMOBILE TYPE: _____ YEAR: ____ MAKE: _____ TAG #: _____

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ARE ANY OF THESE VEHICLES FOR COMMERCIAL USE?: _____

(Signs or advertising are not allowed on vehicles or any other means of posting.)

CREDIT REFERENCES (Please provide three):

NAME: _____ ADDRESS: _____ PHONE #: _____

NAME: _____ ADDRESS: _____ PHONE #: _____

NAME: _____ ADDRESS: _____ PHONE #: _____

PERSONAL REFERENCES (Please provide two):

NAME: _____ ADDRESS: _____ PHONE #: _____

NAME: _____ ADDRESS: _____ PHONE #: _____

BY SIGNING BELOW, THE PROPOSED APPLICANT(S):

- STATES THAT HE/SHE HAS READ AND WILL ABIDE BY ALL THE CONDOMINIUM ASSOCIATIONS DOCUMENTS, INCLUDING THE RULES & REGULATIONS.
- AGREES FOR THE ASSOCIATION TO MAKE INQUIRIES OF THE PERSONAL AND CREDIT REFERENCES PROVIDED ABOVE.
- AGREES TO SUBMIT TO A BACKGROUND AND CREDIT CHECK), THE COST OF WHICH IS BORNE BY THE APPLICANT.
- IF PURCHASE, WILL CONTACT MANAGEMENT REGARDING PYMT OF MAINTENANCE.

FIRST APPLICANT: _____ DATE: _____
(Signature)

SECOND APPLICANT: _____ DATE: _____
(Signature)

ADDITIONAL OCCUPANTS: _____
(Signature) (Signature)

SUMMERSIDE ASSOCIATION, INC. ___APPROVED ___DISAPPROVED

BY: _____ DATE: _____
(Signature and Title)