

**SABAL POINTE TOWNHOMES POA**

**Application for Proposed Sale**

NOTE: This application will not be considered unless filled in completely and submitted to SABAL POINTE TOWNHOMES POA at least 10 days prior to closing. *This application shall be signed by all parties to the sale* or it will be returned without approval given.

REQUIREMENTS:

- **Completed Application, Copy of Driver’s License, Sales Contract, and a \$100 non-refundable check, per adult applicant over the age of 18, made payable to Avid Property Management, 2906 Busch Lake Blvd, Tampa, FL 33614**
  - **A \$50 Rush Fee will be applied if approval is needed prior to the 7 business days allotted for normal processing.**
- Name of Purchaser: \_\_\_\_\_, Phone: \_\_\_\_\_
- Name of Owner: \_\_\_\_\_, Phone: \_\_\_\_\_
- Property Address: \_\_\_\_\_

Application Date: \_\_\_\_\_

Buyers Name: \_\_\_\_\_ SSN: \_\_\_\_\_ Driver’s Lic.#: \_\_\_\_\_  
 Spouse: \_\_\_\_\_ SSN: \_\_\_\_\_ Driver’s Lic.#: \_\_\_\_\_  
 Current Address: \_\_\_\_\_ How long? \_\_\_\_\_  
 Previous Address: \_\_\_\_\_ How long? \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_

Landlord/Mortgage Holder Name on Previous Address: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year \_\_\_\_\_ Tag# \_\_\_\_\_ State \_\_\_\_\_  
 Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year \_\_\_\_\_ Tag# \_\_\_\_\_ State \_\_\_\_\_

**\*\*\*No Commercial trucks or vehicles, RV’s, boats or trailers\*\*\* (Please see Declaration of Covenants for specifics).**

Pet: Dog/Cat Breed: \_\_\_\_\_ Other: (Specify Type) \_\_\_\_\_ Weight: \_\_\_\_\_ lbs. Age: \_\_\_\_\_

Name of Permanent Occupants Not Listed Above:

1. \_\_\_\_\_ Age: \_\_\_\_\_ SSN: \_\_\_\_\_
2. \_\_\_\_\_ Age: \_\_\_\_\_ SSN: \_\_\_\_\_

Current Employer: \_\_\_\_\_ How Long? \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Spouse Employer: \_\_\_\_\_ How Long? \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

In Case of Emergency, please contact:

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

**Your signature authorizes Management to secure credit and other public information and acknowledges receipt of the Rules & Regulations. Any violation may be cause for legal action.**

\_\_\_\_\_  
 Applicant’s Signature Date

\_\_\_\_\_  
 Property Owner’s Signature Date

Signature of Purchaser(s) acknowledges that you have received, read, understand, and will abide by the Supplemental Declaration of Covenants, Conditions, Restrictions and Easements, and the “RULES & REGULATIONS” and the requirements regarding Additional Persons and Single Family residence.

(Approved) or (Disapproved) by: \_\_\_\_\_ Date \_\_\_\_\_