



## TOWER POINTE AT ARBOR TRACE

### APPLICATION FOR SALE OR TRANSFER OF UNIT

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#### INSTRUCTIONS:

*This application must be submitted to the Association not less than 30 days prior to transfer of ownership by sales, gift or inheritance, etc. The application must be accompanied by copies of proof of age documents as described in the "important note" on page 2, and, as appropriate, by a copy of the executed sales contract or certified copy of the instrument evidencing ownership in cases of transfers by inheritance, gift or other means.*

#### APPLICATION:

The undersigned submits this application for approval of the Board of Directors of Tower Pointe at Arbor Trace Condominium Association, Inc. to acquire title to Unit \_\_\_\_\_ and states that the following information is true and correct (any misrepresentation shall be a basis for automatic disapproval):

1. PROPOSED OWNER: Individual(s) or entity that will be the owner of record.

Name

Permanent Address After Acquisition

_____	_____
_____	_____
_____	_____

2. PROPOSED UNIT OCCUPANTS:

- a. "Primary Occupant": Proposed unit occupants must be designated if ownership is to be by more than one person (other than husband and wife) or by an entity which is not a natural person (corporation, partnership, trust, estate, etc.). If applicable, please indicate the name of the primary occupant:

\_\_\_\_\_

- b. Please complete the following information for each of the proposed unit occupants:

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

Age: \_\_\_\_\_

Relationship: \_\_\_\_\_

(to Owner or Primary Occupant – Self, Spouse, Child, Brother, etc. )

3. MOTOR VEHICLES TO BE KEPT ON PROPERTY:

Year/Make/Model

License

\_\_\_\_\_

\_\_\_\_\_

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4. PETS TO BE KEPT IN UNIT: See section 12.6 of Declaration of Condominium documents for restrictions.

Type/Breed:

Height (inches)

Weight (Pounds)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. UNIT NUMBER: \_\_\_\_\_

PURPOSE OF PURCHASE: \_\_\_\_\_

CURRENT OWNER(S): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The undersigned agrees to provide any further information that may be reasonably requested by the Board. The undersigned has received a copy of the Rules and Regulations and of the Declaration of Condominium and exhibits thereto and understands that these documents impose responsibilities and restrictions on each unit owner at Tower Pointe Condominium Association, Inc.

Current Address:

Telephone:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Permanent Address After Acquisition:

\_\_\_\_\_

Signature

\_\_\_\_\_

Printed Name (of each applicant)

\_\_\_\_\_

\_\_\_\_\_

**IMPORTANT NOTE:**

*Because Tower Pointe at Arbor Trace Condominium Association, Inc. is intended to provide "housing for older persons" as a "55 and over community" under applicable statutes and administrative rules, it is required that a copy of a valid photo ID showing proof of age be attached to this application for each person who will be an owner or an occupant of the unit. Common acceptable proof of age documents include a current driver's license or a current passport provided they contain specific information about current age or date of birth.*

*As a "55 and over" community, no unit may be occupied by anyone unless there is at least one person simultaneously occupying the unit who is 55 years of age and over. Occupancy by a person under 18 years of age is only permitted on a temporary basis, as provided in Section 12.8 of the Declaration of Condominium.*