

WESTCHESTER WOODS CONDOMINIUM ASSOCIATION, INC.

UNIT _____

BLDG _____

Application For Purchase, Gift, Devise OR Inheritance Approval

1. This application, an application for approval, and authorization forms must be completed in detail by each proposed adult occupant, other than husband/wife or parent dependant child (which is considered one applicant).
2. If any question is not answered or left blank, this application will be returned, not processed and not approved.
3. Please attach a copy of the sales contract to this application.
4. Please attach a non-refundable processing fee of **\$100.00** to this application, made payable to **Westchester Woods Condominium Association, INC.** for each applicant, other than husband/wife or parent/dependent child (which is considered one applicant). Acceptance of the processing fee does not in any way constitute approval of this application.
5. The completed application must be submitted to the association office at least 15 days prior to the expected closing date.
6. All applicants must make themselves available for a personal interview prior to the final Board of Directors approval. Occupancy prior to Board approval is prohibited.
7. No pets allowed at any time without Board approval.
 - a. No pets allowed in excess of 25 pounds at maturity.
 - b. No pets allowed in excess of 12 inches in height at maturity.
 - c. No more than two pets allowed.
8. Use of this unit is for single family residence only.
9. No trucks, vans, motorcycles, recreational vehicles, or the like, shall be parked without Management approval and then only in an area designated for said vehicle. There will be no long term parking for any such type vehicle. Only one assigned parking space available per unit.
10. The seller (current owner) must provide the purchaser with a copy of all Association Documents and Rules and Regulations.
11. Purchaser must notify the Association office with the exact date of their closing.
12. Occupancy regulations: Two bedroom unit – no more than four occupants.
13. Hours for moving are from 8:00am to sundown, Monday through Saturday.

Must print or type all information on these forms

Date: _____ Bldg #: _____ Unit #: _____ Closing Date: _____

Owner's Name: _____ Tele. #: _____

Owner's Present

Address: _____

Name of Realtor Handling Purchase: _____ Tele. #: _____

Name of Prospective Purchaser (as Title will appear)

a. _____ b. _____ (spouse)

MORTGAGE INFORMATION (If unit will be mortgaged):

Name of Lender: _____ Tele. #: _____

Address: _____

Other Persons who will Occupy the apartment with you:

Name: _____ Age: _____ Relationship/Occupation: _____

Name: _____ Age: _____ Relationship/Occupation: _____

Name: _____ Age: _____ Relationship/Occupation: _____

Have you ever seasonally resided in Florida before? _____ If yes, please state the name, address and dates of residency: _____

If retired please state the company's name and address retired from and when retired: _____

Have you ever been convicted or pled to a crime? _____ If yes, please state the date(s), charge(s) and disposition(s): _____

1. In making the foregoing application, I represent to the Board or Directors that the purpose for the Purchase of a unit at **Westchester Woods** is as follows:

Permanent Residence _____ Seasonal Residence _____ Other (Explain) _____

2. I hereby agree for myself and on behalf of all persons who may use the unit which I seek to purchase that I will abide by all of the restrictions contained in the Bylaws, Rules and Regulations, Association Documents, and restrictions which are or may in the future be imposed by the **Westchester Woods Condominium Association, INC.**
3. I have received a copy of all Association Documents: Yes _____ No _____
I have received a copy of Rules & Regulations: Yes _____ No _____
4. I understand that I will be advised by the Board of Directors of either acceptance or denial of this application. Occupancy prior to Board approval is prohibited.
5. If this application is accepted, I will provide the association with a copy of the Closing Statement and a copy of the recorded Deed within 30 days after closing.
6. I understand that there is a restriction on pets and that I may not bring a pet, nor may any guest or visitor bring a pet into **Westchester Woods Condominium Association**, nor acquire one, either temporarily or permanently after occupancy without approval from the Board of Directors. I understand that there is a restriction on pets and that I may not have a pet that weighs in excess over 25 pounds nor in excess of 12 inches in height at maturity and that I may not have more than two pets.
7. I understand that the acceptance for purchase of a condo unit at **Westchester Woods** is conditioned in part upon the truth and accuracy of this application and upon the approval of the Board of Directors. Any misrepresentation or falsification of the information on these forms will result in an automatic disqualification of my application. Occupancy prior to Board approval is prohibited.

In making the foregoing application, I am aware that the decision of the **Westchester Woods Condominium Association, INC.** will be final and no reason will be given for any action taken by the Board of Directors. I agree to be governed by the determination of the Board of Directors.

Applicant _____ Applicant _____

