

**EDGEWATER IV AT PELICAN SOUND CONDOMINIUM ASSN., INC.**

**APPLICATION FOR APPROVAL TO PURCHASE**

DATE: \_\_\_\_\_ UNIT #: \_\_\_\_\_

CURRENT UNIT OWNER: \_\_\_\_\_

In order to facilitate consideration of this application, I (We) represent that any falsification or misrepresentation of the facts in this application will justify its automatic rejection. I (We) consent to your further inquiry concerning this application, particularly of the references given below.

**PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION**

1. Full name(s) of Applicant(s): \_\_\_\_\_

2. Full name(s) of Applicant's (Spouse) if not listed above: \_\_\_\_\_

3. Home Address: \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_

Cell \_\_\_\_\_ Email \_\_\_\_\_

4. Nature of Business or Profession of all applicants listed above (If retired, former business or profession):  
\_\_\_\_\_

5. Company or Firm Name: \_\_\_\_\_ Position occupied: \_\_\_\_\_

6. Business Address: \_\_\_\_\_

7. The condominium documents for the above-referenced Condominium provide an obligation of unit owners that all units are for single family residence use only. Please state the name, relationship, age and occupation of all other persons who will be occupying the unit:

Name	Relationship	Age	Occupation
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

8. Three (3) personal references (local if possible). **Please attach 3 reference letters to this application.**

Name \_\_\_\_\_ Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_ Phone # \_\_\_\_\_

9. Bank References: \_\_\_\_\_

10. Person to be notified in case of emergency: \_\_\_\_\_

Address: \_\_\_\_\_ Phone # \_\_\_\_\_

11. Prior home address \_\_\_\_\_ How Long \_\_\_\_\_

12. Make of car(s) \_\_\_\_\_ Year \_\_\_\_\_ State License # \_\_\_\_\_

13. If this transaction is a sale: I am purchasing this unit with the intention to: [ ] RESIDE HERE ON A FULL-TIME BASIS; [ ] RESIDE HERE PART TIME; [ ] LEASE THE UNIT. **Please check the box which applies.** I/we will provide the Association with a copy of our recorded deed within ten days after closing.

14. I am aware of and agree to abide by the Declaration of Condominium, the Articles of Incorporation, Bylaws and any and all properly promulgated Rules and Regulations in effect within the terms of my occupancy or (ownership). I acknowledge all of these documents are recorded in the public records of Lee County Courthouse.

15. I understand, agree and authorize that the Association or its agents, in the event it approved a lease is authorized to act as the owner's agent, with full power and authority to take whatever action may be required, including eviction, to prevent violations by lessees and their guests, of provisions to the Declaration of Condominium and the Association's Bylaws, the Florida Condominium Act and the Rules & Regulations of the Association.

16. I agree to pay a \$100.00 nonrefundable fee in connection with the transfer or sale, to cover administrative expenses in regards to the approval process. **Please attach \$100.00 application fee payable to: EDGEWATER IV AT PELICAN SOUND.**

HAVE YOU ATTACHED: \_\_\_\_\_ Signed Application \_\_\_\_\_ Application Fee

\_\_\_\_\_ Sales Contract \_\_\_\_\_ 3 Reference Letters

**Please return above documents & fees to:** KPG Accounting Services, Inc.  
3400 Tamiami Trail N. #302  
Naples, FL 34103

\_\_\_\_\_  
Applicant Date

\_\_\_\_\_  
Applicant Date

[ ] Application Approved

[ ] Application Disapproved

BY: \_\_\_\_\_  
Officer's Signature

\_\_\_\_\_  
Date