Windrush Bay Condominium Association, Inc.

c/o Ameri-Tech Community Management, Inc.

24701 US Hwy 19 N, Ste 102, Clearwater, FL 33763 P: (727) 726-8000 ext. 356 | F: (727) 723-1101 Ashley Moore, LCAM amoore@ameritechmail.com

### PURCHASE APPLICATION

At least two weeks prior to occupancy, a purchaser **MUST** complete this application and return it to Ameri-Tech Community Management at the address above along with a non-refundable \$100.00 fee made payable to **WINDRUSH BAY CONDOMINIUM ASSOCIATION**.

### **INCOMPLETE APPLICATIONS WILL BE RETURNED WITHOUT APPROVAL**

## **Basic Requirements**

- Must be filed each time there is a new owner
- Copy of sales agreement must be attached
- Copy of driver license(s) must be attached
- Application fee

All the governing documents of the Windrush Bay Condominium Association shall apply to any purchaser. Any change(s) to the original approved application shall require a newly completed application. Please note, Ameri-Tech Community Management, Inc. will request a background check prior to purchase approval.

Current Owner Name: \_\_\_\_\_

Unit: \_\_\_\_\_

Property Address of Unit: \_\_\_\_\_

#### **Purchaser Information:**

Applicant		Co-Applicant		
Name:		Name:		
Address:		Address:		
City: S	tate: Zip:	City:	State: Zip:	
Driver's License #:	State:	Driver's License #:	State:	
Date of Birth:		Date of Birth:		
Telephone:		Telephone:		
E-mail:		E-mail:		
Children (Under 18):		Children (Under 18):		
Name:	Age:	Name:	Age:	
Name:	Age:	Name:	Age:	
Number of other residents (Age 18+):		Number of other resid	dents (Age 18+):	
	DOB:	Name:	DOB:	
Name:	DOB:	Name:	DOB:	
Years at Previous Address:		Years at Previous Address:		
□ Own □ Rent Payment/Month: \$		□ Own □ Rent Payment/Month: \$		
Landlord's Name:		Landlord's Name:		
Phone:		Phone:		
Reason for moving:		Reason for moving:		
Banking Information:				
Name of Bank:		Name of Bank:		
Checking      Savings		Checking      Savings		
Bank Location:		Bank Location:		
Pet Information: One (1) pe	et allowed, not to exc	eed 20 lbs. when fully gr	own.	
Pet: 🗆 Yes 🛛 No		If yes, type:		
Weight: Ibs.		Vet Name:	Last Vaccine:	

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Ashley Moore, LCAM

amoore@ameritechmail.com

Waterbed?  $\Box$  Yes  $\Box$  No

Waterbed? 
Ves No

Vehicle Information:

<u>PLEASE NOTE</u>: Trucks/Commercial Vehicles/Motorcycles are NOT allowed to be parked on Windrush Bay Condominium Association property overnight. This also applies to all visitors.

Nur	nber of Vehicles:
1.	Make:
	Model:
	Year:
	Color:
	License Plate:
,	State:

2.	Make:
	Model:
	Year:
	Color:
	License Plate:
	State:

## Applicant's Employer Information:

Name:			Name:		
Address:			Address:		
City:	State:	Zip:	City:	State:	Zip:
Phone:			Phone:		
Occupation:			Occupation:		
How Long:			How Long:		

# Provide Three (3) References:

Name/Phone	Name/Phone
Landlord:	Landlord:
Employer:	Employer:
Other:	Other:

# In Case of Emergency – Provide Three (3) Contacts:

1. Name:	Phone:		
Address:	City:	State:	Zip:
	1		
2. Name:	Phone:		
Address:	City:	State:	Zip:
3. Name:	Phone:		
Address:	City:	State:	Zip:

## Purchase Data:

Realtor/Firm Name:	
Contact Name:	Proposed Closing Date:
Address:	City: State: Zip:
Phone:	Fax:
E-mail:	

If Realtor is not involved, please list information of person or company handling closing (attorney, title company, etc.):Name:Phone:Address:City:State:E-mail:Fax:

# Windrush Bay Condominium Association, Inc.

Purchaser: Upon completion of purchase, you will become a member of the Association. All fees and assessments required by the Association are due and payable the first of each month. Delinquent fees are "**Subject to a Lien on the Property**". The current monthly maintenance fee for Unit: \_\_\_\_\_\_\_\_ is \$\_\_\_\_\_\_. Please note, the maintenance fee is subject to change as set by the Association's governing documents.

By signing below, I attest that all of the information provided in this application is true and correct to the best of my knowledge and I authorize the Association and/or Ameri-Tech Community Management to conduct a background check or other investigation to verify the information int his application.

Furthermore, I hereby acknowledge that I have received a copy of, read and understand the Association's Governing Documents and agree to abide by all of the Association's Governing Documents.

**NOTE**: No person(s) shall be permitted to occupy a unit without approval of this application by the Board of Directors of Windrush Bay Condominium Association. Driver's license number(s) and social security number(s) are used for background checks and will be removed from the form prior to distribution to the Association.

Buyer/Purchaser Signature/Date

Buyer/Purchaser Signature/Date

At least fourteen (14) days prior to occupancy, complete the following steps:

- Complete application in its entirety
- Return application to real estate agent/authorized agent
- Real estate agent/authorized agent is to forward application, sales agreement and fee to address above

Ameri-Tech Community Management, Inc. will process the application/agreements and forward to the Board of Directors for review and approval. Upon completion of this process and approval of this document, and provided all parties agree with Windrush Bay Condominium Association, Inc. Governing Documents, the new owner may begin the process of occupying the unit.

\_\_\_\_\_

### To be completed by Association:

Approved Denied, reason: \_\_\_\_\_\_

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

Board/Management Company Signature