

**Island Park Condominium Owners Association, Inc.**

c/o SUNSTATE ASSOCIATION MANAGEMENT GROUP, INC.

MAILING ADDRESS: P.O.BOX 18809, Sarasota FL. 34276

VENICE OFFICE: 228 Ponce De Leon Avenue

Office 941-870-4920

**APPLICATION FOR SALE OF UNIT AND APPROVAL**

**PLEASE PRINT**

**A non-refundable fee of \$150.00 must accompany this application.** Payable to Sunstate Association Management Group, Inc. The undersigned proposes to sell Unit No: \_\_\_\_\_ Address: \_\_\_\_\_ to: \_\_\_\_\_, identified below, and the undersigned does hereby apply for approval of this sale, by the Island Park Condominium Owners Association, Inc. to which the following information is submitted. **Attached herewith is a copy of the executed Sales Contract.** I understand that any outstanding sums due to Island Park Condominium Owners Association, Inc. must be paid prior to closing.

Seller: \_\_\_\_\_ Seller: \_\_\_\_\_

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

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**PURCHASER'S STATEMENT**

Buyer's Name: \_\_\_\_\_ Spouse Name: \_\_\_\_\_  
Buyer's SS#: \_\_\_\_\_ Spouse SS#: \_\_\_\_\_  
Buyer's DOB: \_\_\_\_\_ Spouse DOB: \_\_\_\_\_  
Present Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Residency Intentions: Year Round Seasonal Lease

Business or Profession (Present or Former): \_\_\_\_\_

Position Occupied: \_\_\_\_\_ Active or Retired: \_\_\_\_\_

Active Duty US Military or Reserves: (Circle One) Yes No

Name of Real Estate Co/Agent: \_\_\_\_\_

Phone / Email \_\_\_\_\_

**Other persons who will occupy the unit with you**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Vehicle Information: How Many: \_\_\_\_\_**

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

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

**Pets**

Only two (2) pets allowed. Must be leashed and owner responsible for disposal of all excrement from all areas.

Yes \_\_\_\_\_ No \_\_\_\_\_ Type \_\_\_\_\_ Weight \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_ Type \_\_\_\_\_ Weight \_\_\_\_\_

