

Palm Gardens of Sarasota Condo Association, Inc.

APPLICATION FOR SALE / RENTAL

\$150 APPLICATION FEE PAYABLE TO PALM GARDENS MUST BE SUBMITTED WITH APPLICATION

\$50 PROCESSING FEE PAYABLE TO CAMS BY STACIA MUST BE SUBMITTED WITH APPLICATION

*****ALL APPLICATION AND PROCESSING FEES ARE NON-REFUNDABLE*****

PLEASE COMPLETE ALL AREAS – PLEASE PRINT – PLEASE ALLOW 10 DAYS FOR PROCESSING

Address/Unit # _____

Possession Date: _____ OR Rental Terms _____ to _____

Applicant Information:

Name (Print) _____

Date of Birth: _____

EMAIL: _____

PHONE: _____

Name of Spouse: _____

Date of Birth: _____

EMAIL: _____

PHONE: _____

Driver's License NO.: _____

State Issued _____

Spouse's Driver's License No.: _____

State Issued _____

SS # _____

Spouse SS# _____

Present Address: _____

Vehicle Information: How Many:

Make: _____ Model: _____ Year: _____

State: _____ License #: _____

Make: _____ Model: _____ Year: _____

State: _____ License #: _____

Emergency Contact Person: _____

Phone: _____

Purpose of Purchase: ___ Rent/Investment ___ Part-Time Residence ___

Full -Time Residence: ___ Other Rental (length of lease, minimum 30 days maximum 3x annually)

If Rental/ Contact person: _____

Phone: _____

Names of Additional Persons to Occupy Premises (give ages If under 18) Anyone over the Age of 18 must complete a Separate Application and submit with Fee*** Please send All Applications and Payments together to avoid delays!!

NUMBER OF ADDITIONAL APPLICANTS _____

Per the Association's Rules and Regulations, only 2 pets max. allowed in each unit.

Pet type(s): _____ **Breed:** _____ **Size:** _____ **Name:** _____

I have received a read a copy of the Rules and Regulations and understand my responsibilities as an owner/renter/occupant. There is only one (1) parking space per unit. I agree to abide by these rules.

Signature _____

Spouse Signature _____

Date _____

AUTHORIZATION FOR VERIFICATION OF INFORMATION FOR CREDIT REPORT, PUBLIC RECORDS, RENTAL OR LEASE HISTORY AND EMPLOYMENT VERIFICATION I agree to hold harmless, Community Association Management By Stacia, Inc. and all providers of Information on the prospective owner/tenant(s) stated above. In the event the information provided by me (us) is found to be misleading or false, my acceptance for this sale/ lease, whether determination is made before or after my date of ownership/occupancy, may be affected. I do hereby authorize with my (our) signature(s), the release of public records, credit report, rental or lease information and employment verification, whether by fax, verbal, photocopy or original signature, to: Community Association Management by Stacia, Inc. and all its members now and in the future for exclusive use of Palm Gardens of Sarasota Condo Association, Inc.

(Signature of Applicant) Phone _____ Date: _____

(Signature of Applicant) Phone _____ Date: _____

Return to: CAMS by Stacia 1800 2nd St. Suite 853, Sarasota, FL. 34236

Office: (941) 315-8044

Email: office@cam-ss.com

\$150 APPLICATION FEE: Make check payable to: PALM GARDENS

\$50 PROCESSING FEE: Make check payable to: CAMS BY STACIA