TO: The Board of Directors, Sunset Ho		
FROM:(Unit Owner SSHN)		
SUBJECT: Request for Approval of Sa		
Instructions:		
the Association's building manager, with a signed copy of the purchase agreement	Purchase must be completed and submitted to hall required documentation attached, including ent and a non-refundable fee in the amount of condominium Apartments Association. Approval rom the date of submission.	
Please print or type:		
Full name of purchaser	Soc. Sec.#	
Full name of co-purchaser	Soc. Sec.#	
Home Address	City	
State	Zip Code	
Telephone (home)	Telephone (business)	
Cell phone (purchaser)	Cell phone (co-purchaser)	
Email address (purchaser)		
Email address (co-purchaser)		
Occupation of purchaser (if retired, form	ner occupation)	
Employer		
	former occupation)	
mployer Address of Employer		

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*Each Unit owner is authorized one vote when dealing with official business of the Association, the name of the person authorized for that vote is______. Provide two credit references, (1 required) and preferably local if possible. 1. Name_____ Address____ City/State_____Telephone___ 2. Name Address City/State______Telephone_____ All Sunset House North units are designated as single family residences only. Please list the names and relationship of all other persons who may be occupying the unit regularly. Name______Relationship Name Relationship Name _____Relationship____ Name Relationship Name______Relationship_____ Name Relationship I will: () reside here full-time; () reside here part-time; () lease unit to others. Person to be notified in case of an emergency: Name Telephone Address_____City/State/Zip_____

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Relationship to Applicant _____

Automobiles to be parked	d on the premises:				
Make/Model	Year	State	License #		
Make/Model	Year	State	License #		
Parking space assignment	for this unit is #				
Mailing address for no address above:	tices regarding this	application	if different from the		
Name		Telephone			
Address	dressCity/State/Zip				
Note: Please complete the for \$53 for each applicant v	•				
Make the check payable t	o:				
Sunset House North Apart	ments of Marco Island, I	nc.			

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Applicant's Affidavit

I have read and understand the Association's Declaration of Condominium, Bylaws and published Rules and Regulations and agree to abide by them. I understand and agree that any misrepresentation in this application will justify its disapproval. I consent to any further inquiry concerning this application and the references given. I agree to be available for an interview with the designated representative(s) of the Association.

NOTE: DO NOT SIGN BELOW UNLESS YOU HAVE BEEN PROVIDED AND READ THE ASSOCIATION'S DECLARATION OF CONDOMINIUM, BYLAWS AND RULES AND REGULATION OF SUNSET HOUSE NORTH APARTMENTS OF MARCO ISLAND, INC.

This application must be signed by all persons becoming owners of record. Signatures: Signature of Applicant Date Signature of Co-Applicant Date Print Name Print Name (Do not write below this line-for office use only) **Checklist:**

- Copy of Purchase Agreement
- · Payment to Sunset House North Condominium Apartments in the amount of \$100.
- Completed and signed application. Note: Application must be signed by all persons becoming owners of record.
- Background Information form completed plus a check for the appropriate amount based on the number of applicants to be named as owners of this unit.

Interviewed by	Date
Application to purchase unit # is approved	not approved
Sunset House North Apartments by	
Title	Date

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