

CENTER GATE ESTATES
VILLAGE CONDO. ASSOC., SECTION III, INC.
APPLICATION FOR SALE/LEASE

(circle one)

This form must be completed by the proposed purchasers or tenants and submitted to the Center Gate III Board of Directors for approval no less than ten (10) days prior to the lease or purchase date. The completed application is to be mailed to
Center Gate III, c/o 4479 Atwood Cay Circle, Sarasota, Florida 34233.
The application fee is \$100.00 made payable to Center Gate III.

UNIT ADDRESS: _____

CURRENT OWNERS NAME: _____

CLOSING DATE OR RENTAL PERIOD (as applicable): _____

AGENT'S NAME (as applicable): _____ PHONE # _____

FIRST APPLICANT PROSPECTIVE PUCHASER OR TENANT (circle one):

NAME: _____ DOB: _____ SS#: _____

MARITAL STATUS: _____ PHONE # _____ DRIVERS LICENSE # _____

PRESENT ADDRESS: _____ HOW LONG: _____

PRESENT LANDLORD: _____ PHONE # _____

OCCUPATION: _____ HOW LONG: _____

BUSINESS NAME: _____ BUS PHONE _____

SECOND APPLICANT PROSPECTIVE PUCHASER OR TENANT (circle one):

NAME: _____ DOB: _____ SS#: _____

MARITAL STATUS: _____ PHONE # _____ DRIVERS LICENSE # _____

PRESENT ADDRESS: _____ HOW LONG: _____

PRESENT LANDLORD: _____ PHONE # _____

OCCUPATION: _____ HOW LONG: _____

BUSINESS NAME: _____ BUS PHONE _____

WILL ANY OCCUPANT HAVE A PET IN THE UNIT? YES / NO (circle one) *(two cats or two small dogs are allowed, not exceeding 15 inches in height, or one cat and one small dog)*

BREED _____ TYPICAL WEIGHT (AT MATURITY) _____ LB.

Is the prospective tenant a service member defined in s.250.01 Florida Statutes to include any person on active duty with the U.S. Armed Forces or state active duty and all members of the Florida National Guard and U.S. Reserve Forces? _____ Yes _____ No

OTHER PERSONS WHO WILL OCCUPY THIS UNIT WITH YOU:

NAME: _____ RELATIONSHIP: _____

DOB: _____ SS# (if over 18): _____ DL# _____

NAME: _____ RELATIONSHIP: _____

DOB: _____ SS# (if over 18): _____ DL# _____

VEHICLES: (Commercial vehicles, boats, trailers, or campers cannot be stored or parked.)

AUTOMOBILE TYPE: _____ YEAR: ____ MAKE: _____ TAG #: _____

AUTOMOBILE TYPE: _____ YEAR: ____ MAKE: _____ TAG #: _____

ARE ANY OF THESE VEHICLES FOR COMMERCIAL USE?: _____

(Signs or advertising are not allowed on vehicles or any other means of posting.)

CREDIT REFERENCES (Please provide three):

NAME: _____ ADDRESS: _____ PHONE #: _____

NAME: _____ ADDRESS: _____ PHONE #: _____

NAME: _____ ADDRESS: _____ PHONE #: _____

PERSONAL REFERENCES (Please provide two):

NAME: _____ ADDRESS: _____ PHONE #: _____

NAME: _____ ADDRESS: _____ PHONE #: _____

BY SIGNING BELOW, THE PROPOSED APPLICANT(S):

- STATES THAT HE/SHE HAS READ AND WILL ABIDE BY ALL THE CONDOMINIUM ASSOCIATIONS DOCUMENTS, INCLUDING THE RULES & REGULATIONS.
- AGREES FOR THE ASSOCIATION TO MAKE INQUIRIES OF THE PERSONAL AND CREDIT REFERENCES PROVIDED ABOVE.
- AGREES TO SUBMIT TO A BACKGROUND AND CREDIT CHECK, THE COST OF WHICH IS BORNE BY THE APPLICANT.
- IF PURCHASE, WILL RECEIVE THE MAINTENANCE FEE COUPON BOOKLET AT CLOSING OR CALL MGMT OFFICE TO ORDER A BOOKLET.

FIRST APPLICANT: _____ DATE: _____
(Signature)

SECOND APPLICANT: _____ DATE: _____
(Signature)

ADDITIONAL OCCUPANTS: _____
(Signature) (Signature)

CENTER GATE EST VILL CONDO ASSOC, SEC III, INC. APPROVED DISAPPROVED

BY: _____ DATE: _____
(Signature and Title)

**CENTER GATE ESTATES VILLAGE
 CONDOMINIUM ASSOCIATION, SECTION III, INC.
 "A 55+ COMMUNITY"
 P.O. BOX 17393
 SARASOTA, FLORIDA 34276-0393**

**AFFIDAVIT/CERTIFICATION OF
 AGE COMPLIANCE**

I/We, _____ do swear and affirm as follows;

1. I/We am the owner/occupant of Unit __ of Center Gate Estates Village Condominium, Section III, located at _____ (insert street address), Sarasota, Florida (herein the "Unit").

2. I/We am over eighteen (18) years of age and a member of the above referenced household.

3. As provided in Rule 100.307, at least one person in the home located at _____, Sarasota, Florida owned/occupied by _____ is at least 55 years of age. The basis for such knowledge is as follows: _____.

4. The contents of this instrument are true and correct and based on my personal knowledge.

Dated this _____ day of _____ 20__.

Under penalties of perjury, I/We declare that I/We have read this document and that the facts stated in it are true and correct.

Sign: _____ Print: _____

Sign: _____ Print: _____

55 Years of Age Restriction Policy Certificate

~~I/We/We am the owner/occupant of Unit __ of Center Gate Estates Village Condominium, Section III, located at _____ (insert street address), Sarasota, Florida (herein the "Unit").~~