

AMBERLY VILLAGE CONDOMINIUM ASSOCIATION, INC.

c/o Sandcastle Community Management
9150 Galleria Court Suite 201
Naples, Florida 34109
Office: (239) 596-7200

APPLICATION FOR OWNERSHIP

*Note: Please submit this application twenty (20) days prior to closing to allow for processing time.
Approval must be received prior to closing.*

Property we wish to purchase in AMBERLY VILLAGE:

Name of Current Owner: _____

Property Address: _____

Estimated Closing Date: _____ Date of Occupancy: _____

_____ **Initial** _____ **Initial - I/We consent to your further inquiry concerning this application particularly of the references given below including a credit/background check.**

PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION:

Full Name of Buyer: _____ SSN#: _____ DOB: _____

Full Name of Spouse: _____ SSN#: _____ DOB: _____

Present Address: _____

Phone: (home) _____ (cell) _____

Email: _____

Auto: Make: _____ Model: _____ Plate# _____

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Please state the name, relationship and age of all other persons who will be occupying the unit regularly

Name	Relationship	Age
_____	_____	_____
_____	_____	_____

In whose name will the DEED be recorded: _____

After Closing – list contact information to receive information from association:

Address _____ City _____ State _____ Zip _____

Phones: Home _____ Cell _____ E-mail _____

REFERENCES: We must have complete addresses

Name: _____ Address: _____

City/State: _____ Zip: _____ Phone: _____

Name: _____ Address: _____

City/State: _____ Zip: _____ Phone: _____

Amberly Village Condominium Association reserves the right to refuse any applicant for just cause. Closing shall **NOT** take place before a Certificate of Approval has been issued by Amberly Village, as per the Protective Covenants.

Seller will transfer Covenants and By-Laws to buyer(s). Buyer(s) agree to submit a copy of the **executed sales contract** and to pay a non-refundable \$100.00 fee in connection with the sale to cover administrative expenses in regards to the approval process. (Separate application & fee must be submitted for co-applicants (excludes married couples)). I agree to submit the fee payable to: Amberly Village Condominium Association with this application.

We understand as buyers (or Agent of buyers) and agree that prior to any closing by us of the aforementioned property, all violations thereon shall be rectified before sale and said property shall be in strict compliance with said Covenants, By-Laws and Rules and Regulations.

We further understand that, if ownership is other than husband and wife, the Board is required to condition its approval upon the designation of one approved natural person as the "primary occupant" also that we must furnish a copy of the recorded deed to the Association.

Name of Closing Agent or Attorney: _____

Phone: _____ Address: _____

CERTIFICATE OF AGREEMENT TO COMPLY

I/We the undersigned, buyer(s) of the property in Amberly Village indicated above do hereby state that we have received, read, understand and agree to be bound by the Declaration of Condominium, Conditions and Restrictions, By-Laws, Articles of Incorporation and Rules of Amberly Village Condominium Association, Inc.

BUYER: _____ DATE: _____

BUYER: _____ DATE: _____

_____ APPROVED _____ DISAPPROVED

Directors Signature

Date

NO APPLICATION WILL BE APPROVED UNLESS COMPLETLEY FILLED OUT

Note: Buyer(s) should contact Royal Wood Master Association (239) 774-2213 to arrange for the transfer of golf privileges.

Amberly Bike Rack Form

Circle Bike location: Bld A/F, Bld B/C BldC/D, Parking lot

Name _____ Unit _____

Phone# _____ Brand Name _____

Color _____ Mens _____ Womans _____