

BROADVIEW CONDOMINIUM ASSOCIATION, INC.
(An "Over 55" Community)
C/O BRISTOL MANAGEMENT SERVICES, INC.,
1930 COMMERCE LANE, SUITE 1,
JUPITER, FLORIDA, 33477

APPLICATION TO PURCHASE:

DATE: _____

I hereby submit the following information for consideration by the Board of Directors to

Purchase Apartment # _____ in Building _____ Parking space # _____

Present Owner (s) _____

Agent _____

Agency _____

Name of Applicant(s) who will own Apt.:

- 1. _____ D.O. Birth: _____
- 2. _____ D.O. Birth: _____ Relationship: _____
- 3. _____ D.O. Birth: _____ Relationship: _____
- 4. _____ D.O. Birth: _____ Relationship: _____

1. Current Address(s) _____

Phone # _____ Fax # _____ Email _____

2. Current Address(s) _____

Phone # _____ Fax # _____ Email _____

3. Current Address(s) _____

Phone # _____ Fax # _____ Email _____

4. Current Address(s) _____

Phone # _____ Fax # _____ Email _____

Local Phone # _____

Names of Others who will occupy unit permanently:

- Name _____ D.O. Birth _____ Relationship _____
- Name _____ D.O. Birth _____ Relationship _____
- Name _____ D.O. Birth _____ Relationship _____
- Name _____ D.O. Birth _____ Relationship _____

A copy of License, Passport or other Document for each Owner and Person occupying the Unit, which lists D.O.B., MUST be attached and will be kept in office file.

Employment Status of Owners & Occupants:

- Occupation _____ Employer _____ Retired _____
- Occupation _____ Employer _____ Retired _____
- Occupation _____ Employer _____ Retired _____
- Occupation _____ Employer _____ Retired _____

How will Title be registered? _____

Date of settlement _____

Is there to be a mortgage? Yes _____ No _____

If so, who is the Lender? _____

A copy of the Warranty Deed when received MUST be provided to the Office and will be kept in your File.

Please provide the information on the vehicles to be kept at Broadview on a permanent basis:

Vehicle Plate # _____ State _____ Year _____ Color _____ Model _____

Vehicle Plate # _____ State _____ Year _____ Color _____ Model _____

No Parking of recreational vehicles, boats, trucks or anything other than a passenger automobile is permitted. A maximum of 2 vehicles per Unit is permitted on premises.

Will you be a year-round resident? _____ If NO, we need address and phone # where you can be reached when not in residence. _____

_____ Phone # _____

Do you expect to rent your Apt.? Yes _____ No _____

Leasing is permitted for a minimum of 185 days and a maximum of one year, with a maximum of 4 permanent Residents. A copy of the Lease must be furnished to the Association, annually.

SUMMER Address if applicable:

Name: _____

Address: _____

City, State: _____

Zip: _____

Phone: _____

SEND BILLS, CERTIFIED MAIL & CORRESPONDENCE TO:

Name: _____

Address: _____

City, State: _____

Zip: _____

EMERGENCY CONTACTS:

Name: _____

Address: _____

City, State: _____

Zip: _____

Phone: _____

Name: _____

Address: _____

City, State: _____

Zip: _____

Phone: _____

PERSONAL REFERENCES (Please Print)

Name: _____
Address: _____
City, State: _____
Zip: _____

Name: _____
Address: _____
City, State: _____
Zip: _____

**A charge of \$100.00 will be required for the processing of this application and expenses involved.
The Board of Directors reserves the right to reject this application.**

NO PETS ARE ALLOWED.

No Children under age 18 may reside here.

A key to the Unit **Must** be on file in the Office for Emergencies. If you change the lock you **Must** provide the Office with that key.

If leaving a Vehicle on the Premises while away, you **MUST** leave a key with the Office in case of emergency.

You **MUST** notify the Office when you arrive / leave for the Season or an extended period of time.

We have an Unattended Guest Occupancy Policy and a Form **must** be filled out and submitted to the Office.

There is no moving in or out on Sundays. When your date of moving is known, contact Maintenance at (561) 744-3950 so that mats can be placed on walls and boards on the floor of the elevator.

A Rules and Regulations Book **MUST** be kept in the Unit.

“PETS: I/We understand that Broadview Condominium Association is a pet-free community, commit to abide by that policy and promise not to bring a pet animal of any kind into the community.”

I have read a copy of the Documents & Rules and Regulations for the Broadview Condominium Association and agree that (all owners) I / we/ my guests will comply with these rules.

Signed _____ Other: _____

PRINT NAME: _____ PRINT NAME: _____

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FOR OFFICE USE ONLY:

Interviewed by: _____ Date: _____
_____ Date: _____

Remarks: _____
