

Bunker Hill Homeowners Association, Inc.

c/o Bristol Management

735 Colorado Avenue #3

Stuart, FL 34994

Phone: 772.288.7255 Fax: 772.288.7203

APPLICATION FOR PURCHASE APPROVAL

1. This application and the attached application for occupancy must be completed in detail by the proposed purchaser.
2. If any question is not answered or left blank, this application will be returned, not processed and not approved.
3. Please attach a copy of the sales contract to this application.
4. Please attach a non-refundable processing fee of \$50.00 to this application, made payable to the Association.
5. The completed application must be submitted to the Association at least thirty (30) days prior to the expected closing date.
6. All applicants must make themselves available for a personal interview prior to the final approval. Occupancy prior to final approval is prohibited.
7. No pets allowed without prior written approval of the Association, and the Association may revoke such approval at any time.
8. No commercial vehicles, boats, trailers, RV's, trucks, motorcycles, motor homes, buses, etc. are permitted on the premises.
9. The seller (current owner) shall provide the purchaser with a copy of all Association documents.
10. The purchaser must notify the Association with the exact date of their closing.
11. Occupancy regulations: Two Bedroom Dwelling-no more than four (4) occupants.

PLEASE PRINT OR TYPE

Date _____ Property Address _____

Approximate Closing Date _____

Owner's Name _____ Phone _____

Present Address _____

Name of Realtor Handling Sale _____ Phone _____

Name of prospective purchaser(s) (as it will appear on title):

Persons who will occupy the dwelling:

<u>Name</u>	<u>Age</u>	<u>Relationship</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

1. In making the forgoing application, I represent to the Board of Directors that the purpose of the purchase of a unit in Bunker Hill is the following:

Permanent Residence _____ Seasonal Residence _____ Other (explain) _____

2. I hereby agree for myself, and on behalf of all persons who may use this unit while I seek to purchase, that I will abide by all the restrictions contained in the By-Laws, Rules and Regulations, Association Documents, and restrictions which are or may in the future be imposed by the Bunker Hill Property Owners Association, Inc.

3. I have received a copy of all Property Owners Association Rules & Regulations: Y N

4. I understand that I will be advised by the Association within thirty (30) days of either acceptance or denial of the application.

5. If this application is accepted, I will provide a copy of the recorded Warranty Deed within ten (10) days after closing.

6. I understand that there is a restriction on pets and that prior written approval is required by the Association.

7. I understand that the acceptance for a purchase of a unit in Bunker Hill is conditioned upon truth and accuracy of this application and upon approval of the Board of Directors. Any misrepresentation or falsification of information on these forms will result in the automatic rejection of this application. Occupancy prior to approval is prohibited.

8. I understand that the Board of Directors of Bunker Hill Property Owners Association, Inc. may cause to be instituted such an investigation of my background as the Board may deem necessary. Accordingly, I specifically authorize the Board of Directors or Bristol Mangement to make such investigation and agree that the information in this and the attached application are true. I agree the Board of Directors and Officers of the Bunker Hill Property Owners Association, Inc. shall be held harmless from any action or claims by me in connection with the use of the information contained herein or in any investigation conducted by the Board of Directors.

In making the foregoing application, I am aware that the decision of the Bunker Hill Property Owners Association, Inc. will be final and no reason need be given for any action taken by the Board. I agree to be governed by the determination of the Board of directors.

Applicant _____
Signature

Applicant _____
Signature

Print Name _____

Print Name _____

Date _____

Date _____

