

Meadows on the Green
100 Meadows Circle
Boynton Beach FL 33436
Phone 561-967-9489

DATE _____
UNIT _____

Check List For: **SALES APPLICANTS** **Closing Date:** _____

_____ **Completed Application**

_____ **Copy of Contract**

_____ **Copy of drivers license and social security card for each buyer**

_____ **2 Checks: \$100 payable to Apogee Association Services &
\$150 payable to Meadows on the Green**

****You should then take this packet to the office of Meadows on the Green****

THE ASSOCIATION WILL THEN SCHEDULE THE FOLLOWING:

_____ **Interview by the Board of Directors before the closing date**

_____ **An Estoppel from Closing Agent (Please provide contact information)**

- ***Be sure to complete the Real Estate section on the application.***
- ***Application must be submitted two weeks before occupancy.***
- ***As noted on the application the buyer must pay a \$3500.00 Capital Contribution to Meadows on the Green at the Closing.***
- ***After taking ownership you may purchase a Gate Clicker. Clickers are \$50.00 each payable to Meadows on the Green.***

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Application for Sale

Building Number: _____ Unit Number: _____ Closing Date _____

Current Owner's Name: _____ Telephone Number: _____

Property Address: _____

APPLICANT'S NAME: _____ **SS#** _____

Current address _____ ***DOB** _____

City _____ Zip: _____ Phone # _____ Email: _____

CO-APPLICANT'S NAME: _____ **SS#** _____

Current address _____ ***DOB** _____

City _____ Zip: _____ Phone # _____ Email: _____

Number of people who will occupy unit _____ **ADULTS** _____ **CHILDREN**

Names of others who will occupy the unit:

- 1. _____ Age _____
- 2. _____ Age _____
- 3. _____ Age _____

PET: Breed _____ Age _____ Color _____ Weight _____ lbs.

#2PET: Breed _____ Age _____ Color _____ Weight _____ lbs.

AUTOMOBILE INFO

Year _____ Make _____ Model _____ Tag# _____ State _____

Year _____ Make _____ Model _____ Tag# _____ State _____

APPLICANT'S PRESENT EMPLOYER INFORMATION

Name: _____ Phone No. _____

How Long _____ Annual income _____ Supervisor _____

Co-APPLICANT'S - EMPLOYER

Name: _____ Phone No. _____

How Long _____ Annual Income _____ Supervisor _____

CURRENT LANDLORD

Current Address _____

Name of Landlord: _____ Phone No. _____

How Long? _____

Previous Address: _____

In Case of Emergency Contact:

Name: _____ Phone No. _____

Is the property being purchase for rental? Yes _____ No _____

Will the Unit property be your year round address? Yes _____ No _____

If not, please list address where you would like us to direct all mail.

Address _____

Phone _____

REAL ESTATE

Name _____ Phone# _____

Agency _____

We declare that the information provided is true and correct. Willful misrepresentation will void any contract or agreement entered into in connection with this Application.

I/We authorize the Association or its agent to obtain and verify a consumer credit and background reports and understand an investigation may be conducted to determine mode of living, financial ability, personal character and general reputation.

A fully executed copy of the sales contract or lease agreement must accompany the application along with a check for **\$150.00** for the non-refundable application fees made out to **Meadows on the Green Condominium Association** and the non-refundable check for **\$100.00** made out to **Apogee Association Services, Inc** at least 14 days prior to the move in date or expected date of closing.

I/We have received and read the Condominium rules and regulations of Meadows on the Green Condominium Association. Repeated violations of these rules and regulations may result in fines to the unit owner of not less than \$100.00 nor more than \$1000.00 per each incident of violation.

I/We have received notice of the \$3500.00 Capital Contribution payable at the closing.

I/We release the Association, their agent(s) and members from any loss, expense or damage, which may result directly or indirectly from any information or reports furnished.

APPLICANT'S SIGNATURE:

_____ **Date** _____

CO-APPLICANT'S SIGNATURE:

_____ **Date** _____

*APPLICANT'S Date of Birth required _____

*APPLICANT'S Social Security number required _____ - _____ - _____

This is to inform you that you have to make an application for a tenant and pay an application fee of \$150.00 to Meadows on the Green in order to rent your unit. Every new lease requires a new application and fee. Meadows on the Green will not process a tenant unless there is an application and the fee is paid. All tenants must have an application.

Owner (Print Name)

Date

Owner's Signature

Co-Owner (Print Name)

Date

Co-Owner 's Signature