

Revision Date: 4/22/2018  
Version 3  
La Maison Club, Inc.  
3450 Gulf Shore Blvd. North  
Naples, Florida 34103  
Office (239)261-0527  
Fax (239)403-9655  
Email: Lamaisonnaples@gmail.com

### **LA MAISON CLUB, INC. UNIT PURCHASE APPLICATION**

PLEASE MAKE SURE YOUR APPLICATION HAS THE FOLLOWING ITEMS. WE WILL NOT PROCESS APPLICATIONS UNTIL THE WHOLE PACKAGE IS COMPLETE.

- TWO REFERENCE LETTERS SIGNED AND DATED
  - A COMPLETED SALES CONTRACT
  - THE NON-REFUNDABLE APPLICATION FEE (\$100.00) MADE OUT TO, LA MAISON CLUB, INC.
  - COMPLETED AND SIGNED APPLICATION
1. The completed application must be submitted to the Association office at least 20 days prior to the expected closing date.
  2. All Applicants must make themselves available for a personal interview prior to final Board of Directors approval. Occupancy prior to the Board of Directors' approval is prohibited.
  3. Use of this apartment is for single family residence only. Minimum of one assigned parking space is available per unit.
  4. The seller must provide the purchaser with a copy of all Association Documents and Rules and Regulations; otherwise, the purchaser must acquire them directly from the Association's website at [www.lamaisonclub.org](http://www.lamaisonclub.org).
  5. Purchaser must notify the Association office with the exact date of the closing.

The acceptance for Purchase of an apartment at La Maison Club, Inc. is conditioned in part upon the truth and accuracy of this application and upon the approval of the Association. Any Misrepresentation, falsification, or incomplete information on these forms may result in the automatic disqualification of the application. Occupancy prior to the Association's approval is prohibited. I consent to further inquiry concerning this application, particularly to the references given below.

PLEASE PRINT OR TYPE THE INFORMATION ON THIS APPLICATION
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TO: THE BOARD OF DIRECTORS OF LA MAISON CLUB, INC.:

[ ] I hereby apply for approval to purchase Unit #\_\_\_\_\_ in La Maison Club, Inc., a Condominium, and for membership in the Condominium Association. A complete copy of the signed Purchase Agreement is attached.

Section 14.3 of the Second Amended and Restated Declaration of Condominium of La Maison Club, a Condominium, requires that the owner give to the Board of Directors written notice of intention to purchase thirty (30) days before the intended closing date.

DATE: \_\_\_\_\_ UNIT # \_\_\_\_\_ PLANNED CLOSING DATE: \_\_\_\_\_

CURRENT OWNER'S NAME: \_\_\_\_\_

CURRENT OWNER ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

NAME OF REALTOR HANDLING SALE: \_\_\_\_\_

PHONE: \_\_\_\_\_ Email: \_\_\_\_\_

REALTOR'S COMPANY: \_\_\_\_\_

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NAME(S) OF PURCHASER(S) (AS TITLE WILL APPEAR):

DATE (S) OF BIRTH \_\_\_\_\_ Co-Applicant \_\_\_\_\_

SOCIAL SECURITY NUMBER (S) \_\_\_\_\_

Co-Applicant: \_\_\_\_\_

ADDRESS OF PURCHASER \_\_\_\_\_

PHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

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MORTGAGE INFORMATION (If unit will be mortgaged.):

NAME OF LENDER \_\_\_\_\_

PHONE \_\_\_\_\_ Email: \_\_\_\_\_

ADDRESS \_\_\_\_\_

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The Condominium Documents of La Maison Club, Inc. restricts Units to use as a Single Family Residence only. Please state the name and relationship of all persons other than the Applicant (s) who will be occupying the Unit on a regular basis.

OTHER PERSONS WHO WILL OCCUPY THE UNIT WITH YOU:

NAME:	AGE	RELATIONSHIP
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NAME	AGE	RELATIONSHIP
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**EMPLOYMENT**

Employed by: (Business Name) \_\_\_\_\_

Phone ( ) \_\_\_\_\_ or retired from: \_\_\_\_\_ ret.date \_\_\_\_\_

Dept. or Position: \_\_\_\_\_

Address \_\_\_\_\_

(Street Address, Apt. #, City, State, Zip) \_\_\_\_\_

Cell Phone#: \_\_\_\_\_ Email Address: \_\_\_\_\_

FAX#: \_\_\_\_\_

Spouse's Employment: (Business Name) \_\_\_\_\_

Phone ( ) \_\_\_\_\_ (or retired from) \_\_\_\_\_ ret.date: \_\_\_\_\_

Dept. or Position: \_\_\_\_\_

Address \_\_\_\_\_

(Street Address, Apt. #, City, State, Zip) \_\_\_\_\_

Cell Phone#: \_\_\_\_\_ Email Address: \_\_\_\_\_

FAX#: \_\_\_\_\_

**I understand that the entire property of La Maison is smoke free. Smoking is not allowed inside of the unit or anywhere on the grounds of La Maison.**

**Initial:** \_\_\_\_\_

In case of emergency notify: \_\_\_\_\_

Email: \_\_\_\_\_

Address and Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

Have you ever seasonally resided or rented in Florida before? \_\_\_\_ If yes, please state the name, add additional residency if applicable.  
address and dates of residency.

Name of Complex \_\_\_\_\_ Name of Landlord \_\_\_\_\_

Address \_\_\_\_\_ Phone number: \_\_\_\_\_

Date of Seasonal Rental \_\_\_\_\_ Email: \_\_\_\_\_

Address \_\_\_\_\_

I understand that there is a restriction on dogs and that I may not bring a dog, nor may any guest, visitor, or tenant bring a dog into La Maison Club, nor acquire one, either temporarily or permanently, after occupancy.

Initial \_\_\_\_\_

**I WILL ABIDE BY THE HOUSE RULES AND REGULATIONS, INCLUDING, BUT NOT LIMITED TO, THE FOLLOWING:**

- ☐ Guest Registration
- ☐ Noise
- ☐ Pool Rules
- ☐ Beach Sand
- ☐ Porches & Balconies
- ☐ Exercise Room Release Form
- ☐ Docks
- ☐ Garbage Disposals
- ☐ Courtyard/Pool Area
- ☐ Grille
- ☐ Car Registration

Should the La Maison manager be required to deal with problem due to a lack of response from the owner/realtor, and it is above and beyond what would be considered the manager's normal duties, a service fee up to \$500 may be assessed to the owner.

REFERENCES: PLEASE INCLUDE TWO LETTERS OF REFERENCE WITH THIS APPLICATION.

REFERENCE ONE: NAME

PHONE

ADDRESS

BUSINESS

Email Address

REFERENCE TWO: NAME

PHONE

ADDRESS

BUSINESS

PURCHASER:

1. In making this application, I understand that I cannot rent this unit for one year after this purchase. I represent to La Maison Club, Inc. that the purpose for the PURCHASE of an apartment at La Maison Club is as follows:

Full time residence \_\_\_\_ Part- time residence \_\_\_\_\_

2. In accordance with the La Maison rental policy I intend to use my unit for  
Seasonal Rental \_\_\_\_ Annual Rental \_\_\_\_ No Rental\_\_\_\_\_

3. **I understand that the Board of Directors of La Maison Club, Inc. will allow no more than six people (including children under 18) to occupy a unit when the owner is not in residence. \_\_\_\_\_ Please initial.**

4. I hereby agree for myself and on behalf of all persons who may use the unit, which I seek to purchase, that I will abide by all of the restrictions contained in the Rules and Regulations which are, or may be in the future, imposed by La Maison Club.

5. I have received a copy of all Association Documents: Yes\_\_\_\_\_ No\_\_\_\_\_

6. I have received a copy of the La Maison House Rules: Yes\_\_\_\_\_ No\_\_\_\_\_
7. I will provide La Maison Club, Inc. with a copy of my recorded deed within 30 days of closing.
8. **La Maison Club Inc. may cause to be instituted an investigation of my background as the committee may deem necessary. Accordingly, I specifically authorize the Association to make such investigation and agree that the information contained in this application may be used in such investigation,** and that La Maison Club, Inc. itself shall be held harmless from any action or claim by me in connection with the use of the information contained herein or any investigation conducted by the Association. In addition, I may be required to participate in an interview either face-to-face or via the internet as a requirement for approval of this lease. In making the foregoing application, I am aware that the decision of La Maison Club, Inc. will be final and no reason will be given for any action taken by the Association and/or the Board of Directors. I agree to be governed by the determination of La Maison Club, Inc. or the Board of Directors

SIGNATURE OF APPLICANT(s): \_\_\_\_\_

SIGNATURE OF CO-APPLICANT: \_\_\_\_\_

Date: \_\_\_\_\_

APPLICATION APPROVED \_\_\_\_\_

DISAPPROVED \_\_\_\_\_

DATE: \_\_\_\_\_

BY (OFFICER OR DIRECTOR)\_\_\_\_\_

**WRITTEN CONSENT TO RECEIVE NOTICES VIA ELECTRONIC MAIL**

**LA MAISON CLUB, INC. ("ASSOCIATION")**

The undersigned consents to the Association sending all notices of (i) membership meetings (ii) membership voting by consent in lieu of a membership meeting; and (iii) Board meetings, to the email address below.

If more than one person owns the property and only one owner signs below, the signer represents that he or she has authority to consent on behalf of the remaining owner(s) of the property.

If a corporation, partnership or other legal entity owns the property, the signer below represents that he or she is authorized to consent on behalf of such entity.

**Please insert your email address below:**

**Email Address:**\_\_\_\_\_

**Please sign and print your name(s), unit number and date below.**

\_\_\_\_\_  
**Print Name:**\_\_\_\_\_

**Date:**\_\_\_\_\_

\_\_\_\_\_  
**Print Name:**\_\_\_\_\_

**Date:**\_\_\_\_\_

**Print Unit Number:**\_\_\_\_\_