

**TARPON VILLAGE APARTMENTS  
CONDOMINIUM ASSOCIATION, INC.**

(Age Restricted - 55 years + Community)

**PURCHASE APPLICATION**  
**MUST BE SUBMITTED 30 DAYS PRIOR TO CLOSING**

Return to: Tarpon Village Apts. Condo, Inc.  
c/o Beachside Property Management  
20 Marco Lake Drive, Suite 9  
Marco Island, FL 34145  
(Emailed documents are not accepted)

I/we hereby apply for approval to purchase (address of property): \_\_\_\_\_

Name of Current Owner(s): \_\_\_\_\_

Title Company/ Closing Agent: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Closing Date: \_\_\_\_\_

*Please submit the following*

- a. A fully *executed* copy of the sales contract
- b. Non-refundable fees of \$75.00 each payable to Tarpon Village Apts. Condo & Beachside Property Mgmt.  
**(Married Couples are considered one applicant.)**
- c. A completely filled out application form. **(Partially completed form will not be considered)**  
*Separate applications must be completed for co-applicants (excludes married couples).*
- d. Copy of Driver's license or passport if non-U.S. Citizen

I (we) represent that the following information is complete and true. I (we) agree that any misrepresentation in this application will justify automatic rejection. I (we) consent to additional inquiry concerning this application, including the background, credit, and check of references below.

TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION

Full Name of Applicant: \_\_\_\_\_ Date of Birth \_\_\_\_\_ S.S.# \_\_\_\_\_

Full Name of Spouse: \_\_\_\_\_ Date of Birth \_\_\_\_\_ S.S.# \_\_\_\_\_

Current Home address:

Street number / name \_\_\_\_\_ City \_\_\_\_\_ State, \_\_\_\_\_ Zip code \_\_\_\_\_

Phone number(s) \_\_\_\_\_ Email address(s): \_\_\_\_\_

Current employer: \_\_\_\_\_ Position Held: \_\_\_\_\_

Employer's Address: \_\_\_\_\_ Tel. Number \_\_\_\_\_

Make of Car: \_\_\_\_\_ Year: \_\_\_\_\_ License No. \_\_\_\_\_ State: \_\_\_\_\_

Second car: \_\_\_\_\_ Year: \_\_\_\_\_ License No. \_\_\_\_\_ State: \_\_\_\_\_

***NO PETS SHALL BE KEPT OR MAINTAINED ANYWHERE ON THE CONDOMINIUM  
PROPERTY UNDER ANY CIRCUMSTANCE.***

I am **purchasing** this unit with the intention to:

Reside in the unit full time       Reside here on a part time basis       leasing the unit

Please list the names, relationship and age of all persons who will occupy your unit with the applicants above.

NAMES	RELATIONSHIP	AGE
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you ever been convicted of a felony? Yes \_\_\_\_\_ or No \_\_\_\_\_

If yes, please include details \_\_\_\_\_

\_\_\_\_\_ Initial \_\_\_\_\_ Initial I have received, read and agree to abide by the Declaration, By-laws, Amendments, Articles of Incorporation and the Rules and Regulations of TARPON VILLAGE APARTMENTS CONDOMINIUM, INC.

\_\_\_\_\_ Initial \_\_\_\_\_ Initial I/ we understand and agree that the association in the event it approves a Lease, is authorized to act as the owner's agent, with full power and authority to take whatever action may be required, including eviction, to prevent violations by Lessees and their guests, of provisions of the Documents and the Rules and Regulations of the Association.

**I/we have read, understood and agree to all of the statements above.**

**Applicant signature:** \_\_\_\_\_ **Printed Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Applicant signature:** \_\_\_\_\_ **Printed Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*\*\*\*\*

Acceptance on behalf of TARPON VILLAGE APARTMENTS CONDOMINIUM, INC.

Approved: \_\_\_\_\_

Disapproved: \_\_\_\_\_

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

\_\_\_\_\_  
*Signature of Authorized Representative for Board of Directors*