

# SEVILLE CONDOMINIUM 12, INC.

## APPLICATION FOR PURCHASE OR LEASE OF CONDOMINIUM

**NOTE: A \$100.00 NON-REFUNDABLE FEE AND COPY OF SALES CONTRACT OR LEASE MUST ACCOMPANY THIS APPLICATION PRIOR TO ITS CONSIDERATION FOR APPROVAL.**

This application is for: \_\_\_\_\_ SALE \_\_\_\_\_ LEASE

Unit \_\_\_\_\_, 2699 Seville Boulevard, Clearwater, Florida 33764

Carport No: \_\_\_\_\_

Name of current owner(s): \_\_\_\_\_

Mailing address of current owner(s): \_\_\_\_\_

**PERSONAL DATA OR PURCHASER(S) – LESSEE(S):** Separate application and fee is required for other than spouse or bona fide dependent.

1. NAME: \_\_\_\_\_ BIRTH DATE: \_\_/\_\_/\_\_ RES. PHONE \_\_\_\_\_

2. NAME: \_\_\_\_\_ BIRTH DATE: \_\_/\_\_/\_\_ RES. PHONE \_\_\_\_\_

1. DRIVER'S LICENSE NO \_\_\_\_\_ VEHICLE #1: \_\_\_\_\_

2. DRIVER'S LICENSE NO: \_\_\_\_\_ VEHICLE# 2: \_\_\_\_\_

SOCIAL SECURITY#: \_\_\_\_\_

SOCIAL SECURITY#: \_\_\_\_\_

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PURCHASER(S) OR LESSEE(S):

CURRENT ADDRESS: \_\_\_\_\_ .HOW LONG \_\_\_\_\_

CHILDREN: (Name & Age) \_\_\_\_\_

PET(S)NO: \_\_\_\_\_ .BREED: \_\_\_\_\_ WEIGHT: \_\_\_\_\_ HEIGHT: \_\_\_\_\_

PURCHASER(S): \_\_\_\_\_

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

BANK NAME: \_\_\_\_\_ ACCOUNT NO. : \_\_\_\_\_

BANK NAME: \_\_\_\_\_ ACCOUNT NO.: \_\_\_\_\_

LESSEE(S): LANDLORD'S ADDRESS/PHONE : \_\_\_\_\_

PURCHASER(S) OR LESSEE(S) (If retired, employment prior to retirement)

1. CURRENT EMPLOYER: \_\_\_\_\_ PHONE: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ HOW LONG: \_\_\_\_\_

2. FORMER EMPLOYER: \_\_\_\_\_ PHONE: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ HOW LONG: \_\_\_\_\_

ANY OTHER PERSONS THAT WILL OCCUPY UNIT FOR MORE THAN ONE (1) WEEK DURING A YEAR'S PERIOD.

HAVE YOU EVER BEEN EVICTED? \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A CRIME? \_\_\_\_\_

HAVE YOU EVER BEEN IN LITIGATION WITH LANDLORD OR CONDOMINIUM ASSOCIATION? \_\_\_\_\_

IF YES, TO ANY OF THE ABOVE THREE (3) QUESTIONS, YOU MUST PROVIDE DETAILS AS TO DATE, LOCATION AND OTHER PERTINENT INFORMATION.

NAME OF REAL ESTATE AGENT OR PERSON HANDLING TRANSACTION: \_\_\_\_\_

ADDRESS/PHONE: \_\_\_\_\_ / \_\_\_\_\_

**SALES/LEASE APPROVAL APPLICATION  
SEVILLE CONDOMINIUM 12, INC.  
PAGE TWO OF TWO**

**PURCHASER(S) ONLY:** Purchaser(s) understand that s/he/they will automatically become a member of the condominium association and that all duly enacted assessments of the association are due and payable as enacted and if unpaid, are subject to a lien upon the unit \_\_\_\_ (Initial)

**PURCHASER(S) & LESSEE(S) AUTHORIZE THE ASSOCIATION OR MANAGING AGENT TO SECURE CREDIT AND ANY OTHER INFORMATION DEEMED NECESSARY IN APPROVING THIS APPLICATION \_\_\_\_ (initials)**

**PURCHASER(S) HAS/HAVE RECEIVED THE FOLLOWING:**

**DECLARATION: \_\_\_\_ BY-LAWS: \_\_\_\_ ARTICLES OF INCORPORATION: \_\_\_\_ MANAGEMENT CONTRACT: \_\_\_\_ RECREATION LEASE: \_\_\_\_ LONG TERM(GROUND) LEASE: \_\_\_\_ Q & A: \_\_\_\_ CURRENT BUDGET: \_\_\_\_ END OF PREVIOUS YEAR FINANCIAL REPORT: \_\_\_\_**

**PURCHASER(S) HAS/HAVE READ THE ABOVE STATED DOCUMENTS AND AFFIRM THAT S/HE/THEY WILL ABIDE BY ALL CONDITIONS AND TERMS OF SAID DOCUMENTS AS NOW ENACTED OR MAY BE DULY ENACTED IN THE FUTURE: \_\_\_\_ (Initials)**

**LESSEE(S) HAVE RECEIVED AND READ THE RULES AND REGULATIONS AND AFFIRM THAT S/H.E/THEY WILL ABIDE BY ALL CONDITIONS AND TERMS OF SAID RULES AND REGULATIONS AS NOW ENACTED OR MAY BE DULY ENACTED IN THE FUTURE. \_\_\_\_ (initial)**

PROPOSED MOVE IN DATE: \_\_\_\_\_

IF LEASE, EXPIRATION DATE: \_\_\_\_\_

APPLICANT(S) SIGNATURE(S)

(X) \_\_\_\_\_ DATE \_\_\_\_\_ WITNESS \_\_\_\_\_

(X) \_\_\_\_\_ DATE \_\_\_\_\_ WITNESS \_\_\_\_\_

**IN ORDER FOR THIS APPLICATION TO BE CONSIDERED IT MUST BE COMPLETED AND ACCOMPANIED BY THE APPLICATION FEE WITH A COPY OF THE SALES CONTRACT AND/OR LEASE AS APPROPRIATE.**

**DELIVER OR MAIL APPLICATION WITH EXHIBITS TO:**

SEVILLE CONDOMINIUM 12, INC.  
AMERI-TECH COMMUNITY  
MANAGEMENT  
24701 US HWY 19 N, SUITE 102  
CLEARWATER, FL 33763

**APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_ (Place X in appropriate blank)**

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

SEVILLE BLDG 12

Dated \_\_\_\_\_

**VEHICLE REGISTRATION**

NAME \_\_\_\_\_

UNIT# \_\_\_\_\_

CELL/PHONE # \_\_\_\_\_

CARPORT SPACE# \_\_\_\_\_

**YR/MAKE** \_\_\_\_\_

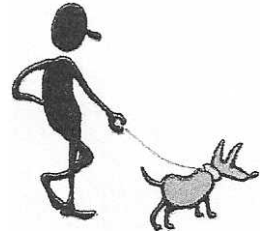
MODEL/COLOR \_\_\_\_\_

LICENSE PLATE # \_\_\_\_\_

EXPIRES \_\_\_\_\_

Thank you for your cooperation

SEVILLE CONDOMINIUM BUILDING 12, INC.  
2699 SEVILLE BOULEVARD  
CLEARWATER, FL. 33764



## Dog Registration

Apartment Owner Name: \_\_\_\_\_

Apartment Number: \_\_\_\_\_

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

Mobile Number: \_\_\_\_\_

Dog Name: \_\_\_\_\_

Dog Age: \_\_\_\_\_

Date of Arrival of Dog to Apartment: \_\_\_\_\_

Dog Breed / Sex: \_\_\_\_\_

Color/Pattern/Weight: \_\_\_\_\_

Spay or Neuter: \_\_\_\_\_

Rabies Tag Number: \_\_\_\_\_

Rabies Tag Expiration: \_\_\_\_\_

Special Needs of Dog (blind/deaf etc): \_\_\_\_\_

**This is to certify that the above information is correct and current.**

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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

SEVILLE CONDOMINIUM 12, INC.

REQUEST FOR ELEVATOR PADS

REQUESTED FOR THE PURPOSE OF:

MOVE-IN: \_\_\_\_\_

MOVE-OUT: \_\_\_\_\_

DELIVERY: \_\_\_\_\_

TODAY'S DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

NAME: \_\_\_\_\_

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

UNIT: \_\_\_\_\_

REQUESTED DATE FOR MOVE-IN/MOVE-OUT/DELIVERIES:

\_\_\_\_\_

PLEASE COMPLETE AND RETURN TO:

**AMERI-TECH COMMUNITY MANAGEMENT, INC.  
24701 US HWY 19 N, SUITE 102  
CLEARWATER, FL 33763**

THANK YOU FOR YOUR COOPERATION.