

PURCHASE CHECK LIST

ASSOCIATION: _____ RECEIVED: _____

ADDRESS: _____

OWNER: _____ LEASEE: _____

LEASEE EMAIL: _____

LEASE START DATE: _____

____ LEASE APPLICATION _____ LEASE CONTRACT _____
SALES APP FEE (\$ _____) (CHECK # _____)

RULES AND REGULATIONS _____ UNIFORM PET FORM

____ REGISTRATION _____ LICENSES _____ PROOF OF INSURANCE

____ VEHICLE REGISTRATION FORM

Office Use Only beyond this point

____ BACKGROUND CHECK (\$ _____) (CHECK # _____)
(INFO SENT: _____) (RESULTS RECEIVED: _____)

____ ESTOPPEL REQUEST RECEIVED: _____ (\$ _____) (CHECK # _____)

____ QUESTIONNAIRE REQUEST RECEIVED: _____ (\$ _____) (CHECK # _____)

____ INFORMATION SENT TO BOARD OF DIRECTORS DATE: _____

____ APPROVED _____ DENIED DATE: _____

____ APPROVAL SENT TO:

____ TITLE AGENCY _____ BUYER _____ REALTOR

____ CERTIFICATE OF APPROVAL (CONSENT TO TRANSFER)

APPLICATION FOR PURCHASE

Complete all questions (Please print)

Please be advised that the definition of familiar occupancy means 2 people per bedroom.

BUYER: _____

Co-Applicant Name: _____

Closing: _____

Address of Unit: _____

City, State and Zip Code: _____

Mailing address (if different from above): _____

City, State and Zip Code: _____

Previous Address: _____

Phone #: _____ Secondary Phone #: _____

Social Security Number: _____ Date of Birth: _____ Driver's License Number: _____

Social Security Number: _____ Date of Birth: _____ Driver's License Number: _____

Are children residing with you? () Yes () No

If yes, please list names and ages below:

Name of Child Age

Name of Child Age

Name of Child Age

List any other intended occupants of unit and their relationships to you below:

SAWGRASS OF NAPLES ASSOCIATION, INC

c/o Infinity Property Management Firm, LLC

9200 Bonita Beach Rd Suite 206

Bonita Springs, FL 34135

Phone: 239-672-8800 Fax: 941-313-7182

Employment Information:

Name of Employer Telephone # of Employer

Employer Address, City State and Zip Code

List all vehicles owned below:

Vehicle #1: Year _____ Make / Model _____

License Plate #: _____ State: _____ Color: _____

Vehicle #2: Year _____ Make / Model _____

License Plate #: _____ State: _____ Color: _____

Have you ever been convicted of a felony? () Yes () No

If yes, list charges:

Have you ever filed for bankruptcy? () Yes () No

If yes, list when and where:

Do you have a pet? () Yes () No

Breed of Pet: _____ Weight: _____ Color: _____

If yes, please refer to the Covenants and Rules and Regulations of the Association on pet restrictions.

Please be advised that there is a fee for the application in the amount of \$100.00 payable to Sawgrass of Naples. This is to be submitted with the application form 30 days prior to the sale/ lease for approval. Please include the lease agreement and/or Sales Contract with this application.

I hereby certify that the above information provided is true and correct and is provided solely for the purpose of obtaining credit and/or personal reference and all information obtained will be held in strict confidence. I realize that any false information may result in the denial of approval by the Association or its Agent.

I further authorize and consent to an investigative consumer report to be prepared about me, which may include information about me obtained from Law Enforcement Agencies, State Agencies, as well as Public Records information such as credit report, social security

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information, criminal history information, motor vehicle records and workers compensation records, such as are allowed by law and in accordance with the Americans.

Signature

Date

Date

Management Use Only (Do not write below this line)

.....
Date application was received: _____

Check Numbers: _____

Application submitted to Board of Directors on: _____

Application () Approved by: or () Denied by:

Board of Director

Title

Date: _____

SAWGRASS OF NAPLES ASSOCIATION, INC

c/o Infinity Property Management Firm
9200 Bonita Beach Rd. Ste. 206
Bonita Springs, FL 34135
Phone (239) 672-8800 * Fax (941) 313-7182

Uniform Pet Registration Application

Each unit may house up to one (1) animal, not exceeding twenty-five (25) pounds at maturity, which may only be domestic dog or cat. Each pet owner shall be responsible for the removal and disposal of the pet's feces or waste. The ability to have and keep a pet is a privilege and the Board is empowered to order and enforce the removal of any pet that becomes an annoyance to the Association.

Name: _____

Address: _____

Pet Type: _____

Breed: _____

Pet Name: _____

Owners Signature in acknowledgment of the
aforementioned: _____

Date: _____

Board Approval Date: _____

*please attach a photo of your pet(s).

SAWGRASS OF NAPLES ASSOCIATION, INC

Vehicle Registration Form

PLEASE PRINT

I. Condo Unit Resident Information: Head of Household Only

First Name: _____ Last: _____

Unit #: _____ Sawgrass Court

Email: _____ 2nd Email: _____

II. Condo Unit Vehicle Registration

Vehicle #1: Name: _____ Decal# _____

Vehicle Make: _____ Tag#: _____

Color: _____ Year: _____

Vehicle #2: Name: _____ Decal# _____

Vehicle Make: _____ Tag#: _____

Color: _____ Year: _____

Please attach to this sheet a copy of the following documents for each vehicle listed:

_____ Copy of Vehicle Registration Attached
(Place Initials on line)

To Pick Up Parking Decals For Your Vehicles

Please contact the management office to schedule for decal pick up.

Infinity Property Management Firm, LLC: Monday – Friday - 9:00 am – 5:00 pm

Calling ahead to set an appointment would be the best way of ensuring your request to be processed in a prompt manner.

Infinity Property Management
9200 Bonita Beach Road #206, Bonita Springs, FL 34135
Phone (239) 672-8800 * Fax (239) 301-4647
mgreen@infinitymgmtllc.com

Background Check

Each adult on the Application must complete a Background Check Form.

A \$100.00 fee will be assessed to each adult filling out a Background Check Permission Form.

Example 1: Father, Mother, and adult son (over 18 years old) renting a unit = \$300.00

Example 2: Individual = \$100.00

Address of Unit _____

Applicant's Name _____

Day Phone _____

Home Phone _____

Cell Phone _____

Current Address: _____

City/State/Zip: _____

Prior Address: _____

City/State/Zip: _____

*Copies of the Driver's License are required for a criminal background check. This information will not be given to any other party for any reason at any time. It is considered privileged and confidential.

Date of Birth _____ Social Security Number _____

Driver's License Number _____ State _____

I authorize Infinity Property Management Firm to obtain my public records and to investigate any personal information on me necessary to arrive at an applicant decision.

Signature _____

Date _____ / _____ / _____

Please return 1 Background Check Form for, each individual, over 18 years old, and a \$100.00

check for each Background Check Form to: Infinity Property Management Firm, LLC, 9200

Bonita Beach Rd., Suite 206, Bonita Springs, FL 34135 Phone 239-672-8800 Fax 941-313-7182