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## St. Lucie Gardens Homeowners Association Inc.

c/o Coastal Property Management 10 SE Central Parkway, Suite 400 Stuart, FL 34994 Office: (772) 600-8900 Fax: (772) 266-9801

# **Sales Application Check List**

All items must be submitted, or your application <u>will not</u> be processed. This form <u>must be</u> submitted with all other necessary paperwork.

### **General submission requirements**

<u>Fully executed application</u>		
<u>Fully executed sales contract</u>		
Copy of photo ID		
\$100 Application fee (non-refundable) – Please make check payable to ST. LUCIE GARDENS HOA		
\$100 Rush Fee (non-refundable – if needed) – Please make check payable to COASTAL PROPERTY MANAGEMENT		
<ul> <li>Rush Applications are processed within three business days</li> </ul>		
Title Company Info for Sale/Purchase		
Company Name:		
Company Address:		
Company Phone:		
Company Email:		
Buyer's Realtor Info for Sale/Purchase		
Company Name:		
Company Address:		
Company Phone:		
Company Email:		
Seller/Current Owner Realtor's Info for Sale/Purchase		
Company Name:		
Company Address:		
Company Phone:		
Company Email:		
Certificate of Approval delivery option (Mark "X" by delivery option)		
Mail original to Title Company and email copy to		
Mail original to Buyer's Realtor and email copy to		
Mail original to Seller's Realtor and email copy to		

# St. Lucie Gardens Homeowners Association, Inc. SALES APPLICATION c/o Coastal Property Management 10 SE Central Parkway, Suite 400 Stuart, FL 34994

The Association shall review the application within thirty (30) days of receipt of required information, documents and fees. Rush applications are processed within three (3) business days. Please ensure all required items are submitted as a complete package – incomplete packages will not be processed. A Certificate of Approval will be issued to the designated recipient.

### **APPLICATION INSTRUCTIONS**

### **APPLICANT** must submit:

- Completed Application (Application will not be processed without all signatures)
- Signed copy of Sales Contract
- Copy of photo ID
- \$100.00 Application Fee (non-refundable) made payable to: ST. LUCIE GARDENS HOA
  - \*Payments are only accepted in the form of checks or money orders
- Owner may not park a trailer, boat, van, camper, truck or commercial vehicle at St. Lucie Gardens, unless it is fully in the garage.

### All items must be submitted as an entire packet to:

Coastal Property Management 10 SE Central Parkway, Suite 400 Stuart, FL 34994

Thank you in advance for your cooperation in following this process.

If you have any questions, please call: Coastal Property Management – (772) 600-8900

Every effort will be made to expedite the notification process

# **SALES APPLICATION**

Date of Application	Property Address:				
Closing Date:					
NAME(s) OF APPLICANT:	Email:				
PRESENT ADDRESS:	City	State Zip			
Cell phone: ( )Hom	ne phone ( )Business	Phone ( )			
CO-APPLICANT:	Email:				
PRESENT ADDRESS:	City	State Zip			
Cell phone: ( )Business Phone ( )Business Phone ( )					
VEHICLE(S) RESIDING AT RESIDENCE					
MAKEYEAR	MODEL				
MAKEYEAR	MODEL				
NUMBER PEOPLE WHO WILL BE RESIDING AT THE HOME					
PETS: Number of Pets Type					
EMERGENCY CONTACT INFORMATION					
NAME	_ RELATIONSHIP	PHONE #			
NAME	_ RELATIONSHIP	PHONE #			

The undersigned, in the event that such approval is granted by the Board of Directors of St. Lucie Gardens HOA, Inc., hereby agrees to abide by the Articles of Incorporation, Declaration of Covenants and Restriction and By-Laws, all covenants, conditions, rules and regulations as set forth, as now or hereafter amended, and any additional covenants, conditions, rules and regulations as may be imposed from time to time by the Board of Directors or the members of St. Lucie Gardens HOA, Inc. Should we have a guest, we will ensure that they too are familiar with the Rules and Regulations.  The undersigned, in the event that such approval is granted by the Board of Directors of St. Lucie Gardens HOA, Inc., hereby agrees to abide with the above stated.						
					Purchaser Signature	Co-Purchaser Signature
Print Name	Print Name					
Date Submitted:						