

Bay Point Plaza Condominium

A Deed Restricted Community

APPLICATION TO PURCHASE

Note: *Application must be submitted 20 days prior to occupancy for Board approval*

A background check is required of all applicants

\$150.00 APPLICATION FEE PER PERSON OR MARRIED COUPLE

ALL OCCUPANTS OVER THE AGE OF 18 MUST SUBMIT AN APPLICATION

Note: Owners must own and live in the unit for two years before renting the unit.

No unit may be leased more than twice per calendar year.

PLEASE PRINT CLEARLY

Property to be Purchased: _____ Closing Date: _____

Current Owner: _____ Home Tele #: _____

Current Owner's Address if Different: _____

Email Address: _____

Cell/Work Tele: _____

Personal Data of Purchaser(s) Name(s):

(1) _____ Phone Contact No. _____

(2) _____ Phone Contact No. _____

Present Address: _____

Email Address: _____

Employment: Name and Address: _____

_____ Telephone # _____

Other Adults Living in Unit:

Name: _____ Relationship: _____ Age: _____

Name: _____ Relationship: _____ Age: _____

Children To Live in Unit:

Name: _____ Age: _____ Name: _____ Age: _____

Name: _____ Age: _____ Name: _____ Age: _____

Pet Information: (Note: *Pets must be 25 pounds or less, not more than two pets. All rules are strictly enforced.*)

Type of Animal: _____ Breed: _____ Weight: _____

Type of Animal: _____ Breed: _____ Weight: _____

Vehicle Information:

Tag # _____ Make/Model _____ Year: _____

Tag # _____ Make/Model _____ Year: _____

No boats, trailers, RVs, campers, motor homes, jet skis or buses are permitted on property overnight.

Purchase Data: Price Paid for Unit: \$ _____

Realtor: _____ Telephone: _____ Address _____

(If Realtor is not involved, please list name, etc. of person handling closing:

Attorney (if applicable): _____

Title Company, Etc. _____

Purchaser - Do you intend to:

Live in Unit Annually: _____ Live in Unit Semi-annually: _____ Lease Unit: _____ Lease is to be written for entire dwelling and not just a portion thereof and may not be leased more than twice per calendar year. If the unit is to be leased, owner must reside in the unit for two years. The owner must submit an application for lease and obtain written Board approval 20 days prior to the finalization of the lease.

Signature(s) _____

If you plan to reside in Bay Point Plaza Condominiums only part of the year, we may need to contact you with Bay Point Plaza Condominiums business while you are living off-property. You will need to notify Jenny Kidd when you are at this address, or at the property.

List other address: _____

E-mail: _____

Telephone Number: _____ Cell # _____

Documents and Agreement (A background check is required of all applicants)

I understand that Bay Point Plaza Condominiums is a deed-restricted community and I agree to abide by the documents and Rules and Regulations.

Have you reviewed the association documents found on the website <https://baypointplaza.com/documents.php>

I have ___ have not ___ reviewed the documents.

Signature: _____

Purchaser automatically becomes a member of the Association. All fees and assessments by the Association are due and payable the first of each month in advance, payable to the designated payee. Delinquent fees are subject to a lien on property.

Mail Completed Applications for Board Approval to:

Corey Palmer, LCAM Telephone: (727) 726-8000 ext. 357 FAX: (727) 723-1101
Ameri-Tech Property Management, Inc.
6415 1st Ave. South
St. Petersburg, FL 33707

Signed Copy of Bay Point Plaza Condominiums of Directors Approval for Sale to be emailed to (provide email address):

Title Company: _____ Realtor: _____

Homeowner: _____

Application Approved By: _____ Date: _____

Corey Palmer, LCAM, Acting as Agent for Bay Point Plaza Condominiums

BACKGROUND INFORMATION FORM **DATE:** _____

I / We _____, prospective
tenant(s) / buyer(s) for the property located at _____

Managed By: _____ Owned By: _____

Hereby allow TENANT CHECK and or the property owner / manager to inquire into my / our credit file, criminal, and rental history as well as any other personal record,
to obtain information for use in processing of this application. I / We understand that on my / our credit file it will appear the TENANT CHECK has made an inquiry. I /
We cannot claim any invasion of privacy or any other claim that may arise against TENANT CHECK now or in the future.

PLEASE PRINT CLEARLY

| <u>INFORMATION</u> | <u>SPOUSE / ROOMMATE</u> |
|---|---|
| SINGLE _____ MARRIED _____ | SINGLE _____ MARRIED _____ |
| SOCIAL SECURITY #: _____ | SOCIAL SECURITY #: _____ |
| FULL NAME: _____ | FULL NAME: _____ |
| DATE OF BIRTH: _____ | DATE OF BIRTH: _____ |
| DRIVER LICENSE #: _____ | DRIVER LICENSE #: _____ |
| CURRENT ADDRESS: _____ _____ HOW LONG? _____ | CURRENT ADDRESS: _____ _____ HOW LONG? _____ |
| LANDLORD & PHONE: _____ | LANDLORD & PHONE: _____ |
| PREVIOUS ADDRESS: _____ _____ HOW LONG? _____ | PREVIOUS ADDRESS: _____ _____ HOW LONG? _____ |
| EMPLOYER: _____ | EMPLOYER: _____ |
| OCCUPATION: _____ | OCCUPATION: _____ |
| GROSS MONTHLY INCOME: _____ | GROSS MONTHLY INCOME: _____ |
| LENGTH OF EMPLOYMENT: _____ | LENGTH OF EMPLOYMENT: _____ |
| WORK PHONE NUMBER: _____ | WORK PHONE NUMBER: _____ |
| HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO | HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO |
| HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO | HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO |
| SIGNATURE: _____ | SIGNATURE: _____ |
| PHONE NUMBER: _____ | PHONE NUMBER: _____ |