HERITAGE PINES CONDOMINIUM ASSOCIATION INSTRUCTIONS TO COMPLETE THE APPLICATION FOR PURCHASE OR LEASE

- 1. If applicants are not legally married, an application for each person over the age of 18 must be completed.
- 2. Send completed application to: Heritage Pines Condominium Association, c/o Sunshine Managed Associations Network, Inc., 8388 S. Tamiami Trail, #173, Sarasota, FL 34238 along with a money order or cashier's check for the application fee in the amount of \$100 per non-married applicant made out to Sunshine Managed Associations Network or SMAN. If applicants are not married or have different last names, an additional application fee is required to process separate credit and background reports.

PERSONAL CHECKS WILL NOT BE ACCEPTED

- 3. Please print legibly or type information. Complete addresses and phone numbers are required.
- 4. If any questions are unanswered or left blank, this application will be returned unprocessed.
- 5. Missing information or lack of requested documents will cause delays in processing and approval of your application.
- 6. Only the applicants/owners are authorized to sign this form.
- 7. Copy of Driver's licensed for all prospective occupants 18 or older

Purchaser is responsible to obtain an assessment coupon book for payment of assessments to the association, by the seller or Management Company.

Heritage Pines Condominium Association c/o Sunshine Managed Associations Network, Inc. 8388 S Tamiami Trail, #173 Sarasota, FL 34238

(Revised for Association 06-21-23)

APPLICATION FOR APPR	OVAL TO (PLEASE CH	ECK ONE)	PURCHASE OR	
LEASE A UNIT				
UNIT # OR BUILDING	ILDING PRESENT OWNER S CITY/STATE ZIP			
UNIT ADDRESS	CIT	ΓY/STATE	ZIP	
	PERSONAL IN	FORMATION		
DateOrie	ntation By			
	Date of Birth/ Phone ()			
	Social Security #			
D: 11: "				
Driver's License # Present Address	City		State 7ID	
	City State ZIP ess? How long at prior address?			
Name of present landlord	Phone ()			
Name of prior landlord				
How many will be living in t	his unit? Adults C	hildren		
	Heritage Pines doe	es not allow pets	!	
Employer	Occupation Salary			
How Long? Co	ntact Person	Phon	e ()	
	SPOUSE INFO	ORMATION		
Name of applicant:	Date	e of Birth/	_/Phone()	
		Social Security #Salary		
Driver's License #	Employe	er	·	
			ong?	
	Phone ()			
	OTHER PROPOSE	ED OCCUPANT	TS .	
Full name and relationship to a	oplicant of others who will o	occupy the unit wit	h Applicant, including children:	
(Maximum occupancy: 1 family	Not more than six persons	residing in unit)		
Name	M F Male Female	Relationship		
	M F		//	
Name	Male Female M F	Relationship	Date of Birth	
Name	Male Female	Relationship	Date of Birth	
N	MF	D.1.4. 1.		
Name	Male Female M F	Relationship	Date of Birth	
Name	Male Female	Relationship	Date of Birth	

EMERGENCY CONTACT INFORMATION

Name	Relationship		
Home Phone Cell Phone			
PLEASE ANSWE	ER YES OR NO TO THE FOLLOWING QUESTIONS		
Have you ever left a rental proper Have you ever been convicted of	perty damage? Yes No rty still owing money? Yes No a crime? Yes No uent rent to any previous management/landlord? Yes No		
NOTE:			
	NED BY USE RESTRICTIONS AND RULES AND REGULATIONS UNITS AND THE CONDOMINIUM PROPERTY.		
	ION I AGREE TO BE AWARE AND ABIDE BY ALL APPLICABLE AND REGULATIONS GOVERNING THE USE OF UNITS AND THE		
RESTRICTIONS" AND "RULES	ION I CERTIFY THAT I HAVE RECEIVED A COPY OF THE "USE S AND REGULATIONS" AND I FURTHER AGREE, TO TAKE ANY GUESTS THAT I HAVE AND THAT THEY WILL ALDO REGULATIONS.		
	ION I CONSENT TO A CREDIT CHECK AND VERIFICATION RE OF INFORMATION BY EQUIFAX OR SUCH OTHER CREDIT CE TO THE ASSOCIATION.		
PROVISIONS AND COVENAN	ION I ACKNOWLEDGE THAT ANY VIOLATION OF THE TERMS, ITS OF THE CONDOMINIUM DOCUMENTS INCLUDING THE "PROVIDES FOR IMMEDIATE ACTION AS PROVIDED IN		
CONDOMININIUM HAS 15 DA BY THE BOARD OF DIRECTO	ION I ACKNOWLEDGE THAT HERITAGE PINES AYS TO CONSERVE THIS APPLICATION AFTER IT IS RECEIVED ORS AND THAT OCCUPANCY OF THE UNIT BEFORE APPROVAL RESULT IN DISAPPROVAL OF THE APPLICATION.		
Applicant Signature:			
Applicant Name (Printed)			
Dated:			
Applicant Signature:			
Applicant Name (Printed)			
Dated:			