



1010 South Ocean Blvd
Pompano Beach, FL 33062
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TRANSMITTAL FORM FOR APPLICATION TO PURCHASE

Please Complete fully and accurately!

Application to Sell Unit No. _____

To Board of Directors

In accordance with the provision of Article XI of the Declaration of the Pompano Aegean, I/We hereby serve notice that owner(s) desire to accept a bona fide offer made to me/us by _____ to purchase Unit No. _____.

Owner(s) agree to provide to the purchaser a copy of the Pompano Aegean Condominium Declaration, By-Laws, Articles of Incorporation and Rules and Regulations prior to the first occupancy of the unit by the purchaser.

Owner(s) will be bound by the Declaration of Condominium By-Laws, Articles of Incorporation and Rules and Regulations of the Condominium Association.

In order for you to facilitate consideration of application for the sale of the above designated unit, owner(s) have caused, the proposed Purchaser to complete the attached application. Owner(s) are aware that any falsification or misrepresentation of the facts in the attached application will result in the automatic rejection of this application to sell. Also attached is a check payable to the Pompano Aegean Condominium Association, Inc. in the amount of \$100.00 to cover investigation and other cost.

Unless you notify me to the contrary within 10-days from the date of receipt of application to sell, attached application by proposed Purchaser and the interview of the Purchase, I will advise Purchaser that this Purchase has been approved.

Please complete the following:

Sale Price of Real Estate (the apartment): \$ _____

Sale Price of Personal Property (furnishings): \$ _____

Total Price: \$ _____

Dated: This _____ Day of _____ 20 _____

Signed: _____ (Seller)

Signed: _____ (Seller)

Unit No. _____

APPLICATION FOR PURCHASE, GIFT, DEVISE OR INHERITANCE APPROVAL

Note: All assessment payments must be current before action will be taken on this application.

1. This application and the attached application for occupancy and authorization forms must be completed in detail by the proposed purchaser.
2. If any question is not answered or left blank, this application will be returned, not processed and not approved.
3. Please attach a copy of the sales contract to this application.
4. Please attach a non-refundable processing fee of \$150.00 to this application, made payable to the Pompano Aegean. Acceptance of the \$150.00 processing fee does not in any way constitute approval of this transaction.
5. The completed application must be submitted to the Association Office at least 30 days prior to the expected closing date.
6. All applicants must make themselves available for a personal interview prior to final Board of Directors approval. Occupancy prior to Board approval is **prohibited**.
7. **No Pets** allowed at any time.
8. Use of this apartment is for single family residence only. Maximum six (6) persons per apartment.
9. **Apartments may not be rented or leased for a period of one year after purchase.**
10. No commercial vehicles, trucks, boats, trailers, motor homes, mobile homes, campers, recreational vehicles, motorcycles, mopeds, etc... permitted to park on the premises overnight.
11. Only one (1) assigned parking space available per apartment.
12. The seller (current owner) must provide the purchaser with a copy of all Condominium Documents, Rules and Regulations, 2 Medco Keys, and mailbox key.
13. Purchaser must notify the Association Office with the exact date of their closing.
14. Moving furniture in or out of any apartment is not permitted on Saturdays, Sundays or Holidays. Hours for moving are 8:00 AM to 4:30 PM, Monday through Friday.
15. Residents must obtain licenses and certificate of insurance from the company they will hire for moving furniture, delivery of furniture, renovations and etc...
16. For complete rules refer to the **Aegean House Manual**.

YOU MUST PRINT OR TYPE ALL INFORMATION ON THESE FORMS

Date: _____ Unit No. _____ Approx. Closing Date: _____

Buyer's Name: _____

Present Address: _____

Name of Realtor handling Sale: _____ Phone #: _____

Name of prospective purchaser (s) (as Title will appear)

Other persons who will occupy the apartment with you:

NAME	AGE	REALTIONSHIP/OCCUPATION
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

1. In making the foregoing application, I represent to the Board of Directors that the purpose for the purchase of an apartment at the Pompano Aegean Condominium Association is as follows:

Permanent Residence: _____ **Seasonal Residence:** _____

2. I hereby agree for myself and on behalf of all persons who may use the apartment which I seek to purchase that I will abide by all the restrictions contained in the by-laws, Rules and Regulations, Condominium Documents and restrictions which are or may in the future be imposed by the Pompano Aegean
3. I have received a copy of all Condominium Documents **Yes** _____ **No** _____
4. I have received a copy of the Condominium Rules and Regulations **Yes** _____ **No** _____
5. I understand that I will be advised by the Board of Directors of either acceptance or denial of this application.
6. If this sale application is accepted, I will provide a copy of the Closing Statement and a copy of the recorded Deed within 30 days after closing.
7. I understand that there is a restriction on pets and that I may not bring a pet nor may any guest, visitor or tenant bring a pet into the Pompano Aegean Condominium Association nor acquire one, either temporarily or permanently after occupancy.
8. I agree not to lease this apartment unit more than twice during any twelve (12) month period. Further that said lease and/or rental shall not be less than sixty (60) day period no longer than one (1) year and that all leases and/or rentals are subject to the approval to the Board of Directors of the Condominium Association. Sub-leasing of apartments is **not** permitted.
9. I understand the acceptance for purchase of an apartment at the Pompano Aegean Condominium Association is conditioned upon the truth and accuracy of this application and upon the approval of the Board of Directors. Any misrepresentation or falsification of the information of these forms will result in automatic rejection of this application. Occupancy prior to the Board of Directors approval is **prohibited**.
10. I understand that the Board of Directors of the Pompano Aegean Condominium Association may cause to be instituted an investigation of my background as the Board may deem necessary. Accordingly, I specifically authorize the Board of Directors or Associated Credit Reporting Inc., to make such investigation and agree that the information contained in this and the attached application may be used in such investigation and that the Board of Directors and Officers of the Pompano Aegean Condominium Association itself shall be held harmless from any action or claim by me in connection with the use of the information contained herein or any investigation conducted by the Board of Directors.

In making the forgoing application, I am aware that the decision of the Pompano Aegean Condominium Association will be final and no reason will be given for any action taken by the Board of Directors. I agree to be governed by the determination of the Board of Directors.

Applicant 1. _____ **Applicant 2.** _____

For the Complete Rules, refer to the Pompano Aegean House Manual