



**SUMMERLIN WOODS CONDOMINIUM ASSOCIATION, INC.**

*"A Multi-Association, Limited Access, Gated Community"*

Office: The Atrium Executive Center  
8695 College Parkway, Suite 2016, Fort Myers, Florida 33919  
(239) 489-2345 • Fax (239) 489-1940

SUMMERLINWOODS@GMAIL.COM

WWW.SUMMERLINWOODSFORTMYERS.COM

**(REVISION H)**

# SALE APPLICATION

(ALLOW 7 DAYS FOR PROCESSING)

**SELLER NAME** \_\_\_\_\_ **UNIT ADDRESS** \_\_\_\_\_

**SALE PRICE \$** \_\_\_\_\_ **FURN./UNFURN.** \_\_\_\_\_

**(A) BUYER NAME (PRIMARY NAME ON DEED)** \_\_\_\_\_

BUYER (DOB) \_\_\_\_\_ (SS#) \_\_\_\_\_ (DL#) \_\_\_\_\_ (ST) \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PRIOR ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

CONTACT / WORK (\_\_\_\_) \_\_\_\_\_ HOME(\_\_\_\_) \_\_\_\_\_ CELL(\_\_\_\_) \_\_\_\_\_

OCCUPATION & POSITION \_\_\_\_\_ #YRS. \_\_\_\_\_

EMPLOYED BY \_\_\_\_\_

**(B) BUYER NAME (SECONDARY NAME ON DEED)** \_\_\_\_\_

BUYER DOB) \_\_\_\_\_ (SS#) \_\_\_\_\_ (DL#) \_\_\_\_\_ (ST) \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PRIOR ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

CONTACT / WORK (\_\_\_\_) \_\_\_\_\_ HOME (\_\_\_\_) \_\_\_\_\_ CELL(\_\_\_\_) \_\_\_\_\_

OCCUPATION & POSITION \_\_\_\_\_ #YRS. \_\_\_\_\_

EMPLOYED BY \_\_\_\_\_

***NOTE: ADDITIONAL NAMES ON DEED WILL REQUIRE ADDITIONAL APPLICATIONS. DEEDS TO BE HELD IN A TRUST, CORPORATION, LLC, ETC. MUST SUBMIT DOCUMENTATION OF SAME WITH THIS APPLICATION.***

**ADDITIONAL RESIDENT / OCCUPANT INFORMATION**

(LIMIT 2 ADULTS PER BEDROOM) (LIST ALL PERSONS THAT WILL OCCUPY THE UNIT)  
(NAME & RELATIONSHIP) (IDENTIFY IF RESIDENT IS UNDER 18YEARS OF AGE)

- 1.) \_\_\_\_\_
- 2.) \_\_\_\_\_
- 3.) \_\_\_\_\_
- 4.) \_\_\_\_\_

**VEHICLE INFORMATION** (LIMIT 2 PER UNIT BY PERMIT ONLY)

(OPEN- BED TRUCKS, MOTORCYCLES, WATERCRAFT & TRAILERS ARE PROHIBITED ON  
PROPERTY FOR RESIDENTS & GUESTS)(SEE DOCUMENTS, RULES & REGULATIONS)

(YR)\_\_\_\_(MAKE/MODEL)\_\_\_\_\_ (2/4DR)\_\_\_\_\_  
(CAR/TRUCK/SUV)\_\_\_\_\_ (COLOR)\_\_\_\_\_ (LIC/TAG#)\_\_\_\_\_ (ST)\_\_\_\_\_

(YR)\_\_\_\_(MAKE/MODEL)\_\_\_\_\_ (2/4DR)\_\_\_\_\_  
(CAR/TRUCK/SUV)\_\_\_\_\_ (COLOR)\_\_\_\_\_ (LIC/TAG#)\_\_\_\_\_ (ST)\_\_\_\_\_

**PET INFORMATION (IF NONE MARK N/A)** (OWNERS ONLY / NO  
VISITING PETS ALLOWED / 20LB. MAXIMUM ADULT WEIGHT / PET PHOTO &  
VETRENARIAN REGISTRATION REQUIRED)

DOG/BREED \_\_\_\_\_ CURRENT/ADULT WEIGHT \_\_\_/\_\_\_ LBS.  
CAT/ BREED \_\_\_\_\_ CURRENT/ADULT WEIGHT \_\_\_/\_\_\_ LBS.  
LIST ALL OTHER PETS (IF ANY) \_\_\_\_\_

**PERSONAL REFERENCE & EMERGENCY CONTACT**

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_  
DAY PHONE (\_\_\_\_) \_\_\_\_\_ NIGHT PHONE (\_\_\_\_) \_\_\_\_\_

**BUYER AGENT INFORMATION:**

COMPANY \_\_\_\_\_ BROKER \_\_\_\_\_  
COMPANY PHONE \_\_\_\_\_ FAX \_\_\_\_\_  
AGENT NAME \_\_\_\_\_ CELL \_\_\_\_\_  
AGENT/COMPANY EMAIL ADDRESS \_\_\_\_\_

**LISTING AGENT INFORMATION:**

COMPANY \_\_\_\_\_ BROKER \_\_\_\_\_  
COMPANY PHONE \_\_\_\_\_ FAX \_\_\_\_\_  
AGENT NAME \_\_\_\_\_ CELL \_\_\_\_\_  
AGENT/COMPANY EMAIL ADDRESS \_\_\_\_\_

**TITLE COMPANY INFORMATION:**

COMPANY NAME \_\_\_\_\_  
COMPANY ADDRESS \_\_\_\_\_  
COMPANY EMAIL ADDRESS \_\_\_\_\_  
PHONE (\_\_\_\_) \_\_\_\_\_ FAX (\_\_\_\_) \_\_\_\_\_  
DATE OF CLOSING \_\_\_\_\_

**APPLICANT AGREEMENT & CONSENT**

APPLICANTS DO HEREBY AGREE AND CONSENT THAT THE ASSOCIATION MAY REQUEST AND OBTAIN ADDITIONAL INFORMATION THAT THE ASSOCIATION DEEMS NECESSARY IN THE PROCESSING OF THIS APPLICATION INCLUDING BUT NOT LIMITING TO THE ENGAGEMENT OF THE SERVICES OF AN INDEPENDENT INVESTIGATIVE SERVICE FOR A CONFIDENTIAL CRIMINAL BACKGROUND REPORT.

**\$ 50.00 PROCESSING FEE PER SALE APPLICATION**

**\$50.00 BACKGROUND INVESTIGATION FEE (PER ADULT AND ADDITIONAL OCCUPANTS OVER 18YEARS OF AGE).**

(ALL FEES ARE NON-REFUNDABLE) THE PROPER FEE AND FORM MUST BE SUBMITTED PRIOR TO PROCESSING. PLEASE MAKE CHECK PAYABLE TO SUMMERLIN WOODS CONDOMINIUM ASSOCIATION INC. OR (SWCAI). NOTE: LENDER QUESTIONNAIRE FORMS OR ADDITIONAL DOCUMENTATION REQUIRE ADDITIONAL FEES.

**ACKNOWLEDGMENT**

APPLICANTS HEREBY ACKNOWLEDGE RECEIPT OF THE ASSOCIATION DOCUMENTS AND ALL AMENDMENTS THERETO, A COPY OF THE RULES AND REGULATIONS AND AGREE THEY AND THEIR OCCUPANTS /GUESTS OR TENANTS WILL FULLY COMPLY WITH SAME. APPLICANTS HEREBY ACKNOWLEDGE THAT NO PETS, MOTORCYCLES, BOATS, TRAILERS ETC. WILL BE BROUGHT UPON THE ASSOCIATION PROPERTY BY THEIR OCCUPANTS / GUESTS / TENANTS OR INVITEES.

APPLICANTS HEREBY CERTIFY AND SWEAR THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND ACCURATE TO DATE TO THE BEST OF THEIR KNOWLEDGE.

**NOTE: THIS APPLICATION MUST BE SUBMITTED WITH:**

- A) ALL REQUIRED SIGNATURES,**
- B) SIGNED CONTRACT FOR PURCHASE,**
- C) PROPER FEE (APPLICATION AND BACKGROUND)**
- D) COPY OF DRIVER LICENSE (ALL OWNERS & OCCUPANTS)**
- E) ADDITIONAL PET DOCUMENTATION REQUIRED (OWNERS ONLY)**

\_\_\_\_\_  
DATE \_\_\_\_\_  
SIGNATURE (SELLER/AGENT)

\_\_\_\_\_  
DATE \_\_\_\_\_  
SIGNATURE APPLICANT (A) (FIRST (PRIMARY) NAME ON DEED)

\_\_\_\_\_  
DATE \_\_\_\_\_  
SIGNATURE APPLICANT (B) (SECONDARY NAME ON DEED)