### VILLAS OF BONNIE BAY **HOMEOWNERS ASSOCIATION**

## C/O AMERI-TECH PROPERTY MANAGEMENT

6415 1<sup>St</sup> Avenue South St Petersburg, FL 33707 mdiorio@ameritechmail.com

(727) 726-8000 Fax – 727-873-7307

#### **SALES APPLICATION**

# \$150 Application/ Background fee

#### There is a 24 month waiting period to Rent units after sale

CLOSING DATE:	Unit #	Phase
Seller's name:	Phone #	
Buyer's name:		
	O P: 4	n.
Email address fo	r Owner Directo	ory Purposes:
Complete Name, Contact and Phone number of Title Company or Attorney Handling the Closing:		
Persons who will occupy the above address are as for	ollows:	
Name:	Age:	Home / Cell:
Name:	Age:	Home / Cell:
Other occupants:	Age:	<u></u>
#Pet(s)(Aggressing Regulation		
Vehicle (s) Make/Model 1.		
2		
Real Estate Agent (if applicable)		Phone #:
Purchaser (s) states that he has received a copy of al understood and agrees to abide by all the conditions assessments, legal fees having been paid in full or v	s and terms therein. Ma	nintenance Fees, late charges, special
PLEASE NOTE: Buyer must be provided with:		
Copies of Documents provided by seller		
Rules and Regulations provided by seller		
Coupon Maintenance Book (transferred from seller or ordered by Management Company)		
I/We declare without reservation that the above information is true and accurate. I /We have read, understood, and agree to abide by the Association's Rules and Regulations. I/We have also understood and agree to accept the delinquent account collection procedures by the Association.		
Purchaser:	Tenant:	

(Signature)

(Signature)