



Application for Approval to Purchase Unit

To: Community Management Associates, Inc.
3806 Exchange Ave
Naples, FL 34110

I, (We) hereby apply for approval to purchase unit # _____ in Princeton Place at Wiggins Bay Condominium Two for the period beginning _____ and ending _____ (30 day minimum).

A COMPLETED COPY OF THE SIGNED AGREEMENT ATTACHED.

A check in the amount of \$100.00, payable to Princeton Place at Wiggins Bay Condominium Two must accompany this application, along with background fee of \$50.00 per person, over the age of eighteen, for the purpose of defraying costs of checking references and other expenses related to the process of this application.

To facilitate consideration of this application, I (We) represent the following information is factual and correct and agree that any falsification or misrepresentation in this application will justify its automatic rejection. I (We) consent to your further inquiry concerning this application, particularly of the references given below.

The prospective lessee or rental agent will be advised by the Association or management company within a 20-day period from the date the application is received by the Association whether this application has been approved.

PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION

1. Full Name or Applicant _____
2. Full Name of Spouse _____
3. Home Address _____
Telephone Home () _____ Cell () _____ Business () _____
4. Business or Profession _____
5. Company Name _____ Address _____
6. The condominium documents of Princeton Place II at Wiggins Bay provide an obligation of unit owners that all units are to be used as single-family residences only. Please state the name and relationship of all other persons who will be occupying the unit on a regular basis.

7. Two personal references (Naples area if possible) * See attached character reference forms.

8. Mailing address for notices connected with this application

Name _____
Address _____
City/State/Zip _____
Telephone _____
Email _____

9. Two (bank) credit references (local if possible)

Name _____ Telephone _____
Address _____
Account Number _____
Name _____ Telephone _____
Address _____

10. Person to be notified in case of emergency.

Address _____ Telephone _____

11. Make of Car _____

12. I am purchasing this unit with the intention to (1) Reside here on a full-time basis; (2) reside here on a part time basis (3) lease the unit. (Please circle the number that applies). I (We) will provide the Association with a copy of our recorded deed within ten days after closing.

13. I (We) are aware of and agree to abide by the Declaration of Condominium of Princeton Place Condominium Two, the Articles of Incorporation, Bylaws, and all properly promulgated rules and regulations. I acknowledge receipt of copies of the Condominium Association and Property owner Associations rules. **ONLY PASSENGER TYPE VEHICLES ARE ALLOWED OVERNIGHT – NO BOAT TRAILERS, MOTORCYCLES OR PICK-UP TRUCKS ALLOWED.**

14. The Condominium Documents: Section 17.1 of Princeton Place Condominium Two provide an obligation of unit owners that all units are to be used as single-family residents only. A maximum of two (2) persons per bedroom is allowed.

15. I (We) are aware of and agree that the Association and/or management company, when the unit is leased, is authorized to act as the owner’s agent , with full power and authority to take whatever action may be required, including eviction, to prevent violations by lessees and their guests of provisions in the PRINCETON PLACE CONDOMINIUM TWO Documents.

Applicants Signature

Applicants Signature

APPLICATION APPROVED _____ DISAPPROVED _____

Date _____

BY _____
Office, Director, or Agent