

KEY COLONY NO. 1 CONDOMINIUM ASSOCIATION, INC.
"THE TIDEMARK"
201 CRANDON BOULEVARD
KEY BISCAYNE, FLORIDA, 33149

08/04

APPLICATION FOR PURCHASE
(PLEASE PRINT OR TYPE)

- THIS APPLICATION AND THE ATTACHED APPLICATION FOR OCCUPANCY MUST BE COMPLETED IN DETAIL BY THE PROPOSED PURCHASER.
- PLEASE ATTACH A COPY OF THE SALES CONTRACT TO THIS APPLICATION.
- PLEASE ATTACH A NON-REFUNDABLE PROCESSING FEE OF \$150 TO THIS APPLICATION.
- THE COMPLETED APPLICATION MUST BE SUBMITTED TO THE ASSOCIATION AT LEAST 30 DAYS PRIOR TO THE EXPECTED CLOSING DATE.
- ALL APPLICANTS MUST BE INTERVIEWED PRIOR TO FINAL APPROVAL.
- IF THE UNIT IS BEING PURCHASED BY A CORPORATION, PARTNERSHIP, ETC., THE CONDOMINIUM ASSOCIATION REQUIRES THAT ADDITIONAL INFORMATION BE PROVIDED. PLEASE CONTACT THE MANAGER'S OFFICE FOR DETAILS.

DATE _____ APARTMENT # _____ APPROX. CLOSING DATE _____

SELLER'S NAME _____ TELEPHONE # (____) _____

SELLER'S ADDRESS _____ (ZIP) _____

NAME OF PROSPECTIVE PURCHASER (As Title will appear):

a. _____ b. _____ (spouse)

CHILDREN who will usually occupy the apartment with you:

NAME BIRTH DATE NAME BIRTH DATE

OTHER PERSONS who will usually, frequently or occasionally occupy the apartment:

NAME AGE RELATIONSHIP

1. In making the foregoing application, I represent to the Board of Directors that the purpose for the Purchase of an apartment at the Tidemark is:
Permanent Residence _____ Seasonal Residence _____ Other (state) _____ Investment (For Rental) _____
2. I understand that the acceptance for purchase of an apartment at THE TIDEMARK is conditioned upon the truth and accuracy of this application and upon the approval of the Board of Directors. Occupancy prior to approval is prohibited.
3. 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 Declaration of Condominium, By-Laws, Rules and Regulations and restrictions which are or may in the future be imposed by the KEY COLONY NO. 1 CONDOMINIUM ASSOCIATION.
4. I have received a copy of all Condominium Documents, Q & A Sheet and Rules and Regulations: Yes _____ No _____
5. I understand that within a 20 day period, I will be advised by the Condominium Association of either acceptance or denial of this application.
6. If this application is accepted, I/we will provide a copy of the recorded Deed within ten (10) days after closing.
7. I understand that we are not permitted to have a dog that weighs in excess of 20 pounds at maturity or may any guests, visitors, or tenants bring any pets on to the premises.
8. I understand that the Board of Directors of the KEY COLONY NO. 1 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 their agents 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 KEY COLONY NO. 1 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 foregoing application, I am aware that the decision of the KEY COLONY NO. 1 CONDOMINIUM ASSOCIATION will be final and that 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 _____ Applicant _____