

COUNTRY MEADOWS OF SARASOTA HOMEOWNERS' ASSOCIATION, INC.

P.O. BOX 51754
Sarasota, FL 34232

SALE/PURCHASE APPLICATION

A non-refundable fee of \$100.00 payable to "Country Meadows of Sarasota HOA" and an executed sales contract must accompany this application. You can email this application and estoppel requests to countrymeadowssrq@gmail.com and/or mail hard copy along with your application fee to Country Meadows of Sarasota HOA, address listed above.

The present owner proposes to sell Lot number ____ at address _____ to the prospective Purchaser(s) identified below, and the undersigned does hereby apply for approval of this Sale/Purchase Application by the Country Meadows of Sarasota Homeowners' Association Inc ("CMoS") to which the following information is submitted. CMoS reserves the right to deny a sale based on the information obtained from this application and reports.

Owner Name: _____ Signature: _____ Date: _____

Owner Name: _____ Signature: _____ Date: _____

1. IDENTIFICATION OF PURCHASER(S)

Name of Purchaser(s): _____

Date of Birth of Purchaser(s): _____

Current permanent address: _____

From: _____ To: _____

Previous address (prior to current address): _____

From: _____ To: _____

Telephone Number(s) (include area code): _____

Email address(es): _____

Employment (or prior employment, if retired):

Name of Company: _____ Address: _____

Occupation: _____ Position held: _____ How long: _____

Number of Eligible Drivers in Household: _____ License Numbers for all Household Drivers (attach photocopies): _____

2. REFERENCES

Personal references (other than relatives):

Name: _____ Address: _____ Telephone: _____

Name: _____ Address: _____ Telephone: _____

Name: _____ Address: _____ Telephone: _____

3. PURCHASE INFORMATION:

Scheduled Closing Date: _____

Reason for this purchase (check one): Permanent Residence _____ Part-Time Residence _____ Investment _____

4. PURCHASER ACKNOWLEDGEMENTS

Purchaser(s) please initial each in the space provided:

_____ I/We understand that the CMoS HOA fee of \$350.00 is paid by the owner semi-annually; \$175.00 due on January 1st and \$175.00 due on July 1st. This fee is subject to change.

_____ I/We agree to provide any further information that may be reasonably requested by the CMoS Board.

_____ I/We grant permission to the CMoS Board to use the email address or any other contact information provided herein for communication regarding the purchase/sale or CMoS matters.

_____ I/We hereby grant permission to the CMoS Board of Directors, or their delegates, to contact any or all of the above references with the understanding that all information will be held in strict confidence.

_____ **I/We have received a COMPLETE copy of the Articles of Incorporation, Bylaws, Declaration of Covenants, Conditions and Restrictions, and Rules and Regulations. Furthermore, I/we have read all said documents and agree that we and all persons occupying this property shall comply with all rules, regulations and restrictions therein including but not limited to the following:**

- Commercial vehicles, trailers, boats and campers are prohibited unless entirely enclosed within a garage.
- Yards must be maintained. No overgrowth, underbrush or weeds.
- Homes are single family occupancy only.
- You may have a home office but no client or customer traffic or business signs.
- Pets must be on a leash – you must pick up after your pet.
- Yard waste and garbage must be kept out of view and not placed on curbside until 5pm prior to pick up day.
- All exterior changes/improvements must be approved in advance by the Architectural Review Committee.
- Rentals are subject to limitations provided in our governing docs and must be approved by the CMoS Board prior to occupancy by a tenant. No home can be rented for the first 18 months of ownership.

_____ I/We hereby agree and authorize CMoS, pursuant to the Fair Credit Reporting Act, to obtain a consumer credit report, and criminal history information and consider those reports in connection with the review of the application. Notwithstanding anything in the CMoS governing documents to the contrary, criminal history information shall only be used to determine if the applicant (which shall include all proposed occupants) has been designated by a court as a sexual predator or sexual offender, been convicted of the manufacture or distribution of a controlled substance as defined under the Federal Controlled Substances Act, or been convicted of a felony crime involving violence to persons or damage to property. For purposes of applying the foregoing factors, arrests shall not be considered, nor misdemeanor offenses, and the nature, severity and recency of the crime shall be considered, as well as what the convicted person has done since a conviction. CMoS may disregard a conviction if the facts warrant it.

5. ATTEST

Under penalty of perjury, the undersigned certifies that the foregoing information is true and correct.

For each Purchaser:

Name (print): _____ Signature: _____ Date: _____

Name (print): _____ Signature: _____ Date: _____

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RESIDENT INFORMATION FORM

Prospective purchasers must complete this form and submit it to the CMoS Board with their Sale/Purchase Application. Present owners should use this form when any of the information herein changes and submit to the Board (only changed sections need be completed.) **PLEASE PRINT.**

1. PURCHASER/OWNER IDENTIFICATION:

Last Name: _____ First Name: _____
Lot #: _____ CMoS Street Address: _____

2. ADDITIONAL OCCUPANTS:

| | | | |
|-------------|---------------------|------------|---------------------|
| Name: _____ | Gender (M/F): _____ | Age: _____ | Relationship: _____ |
| Name: _____ | Gender (M/F): _____ | Age: _____ | Relationship: _____ |
| Name: _____ | Gender (M/F): _____ | Age: _____ | Relationship: _____ |
| Name: _____ | Gender (M/F): _____ | Age: _____ | Relationship: _____ |
| Name: _____ | Gender (M/F): _____ | Age: _____ | Relationship: _____ |

3. VEHICLES: Make, Model, Year and license number of vehicle(s) applicant intends to keep at the home. (No trailers, boats, commercial vehicles, motorhomes, campers, etc. allowed)

| Make | Model | Year | License Plate # |
|-------|-------|-------|-----------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

4. ALTERNATE/MAILING ADDRESS:

If you will not be a full-time resident or desire a different mailing address, please provide:

Address: _____

5. ALARM COMPANY (if applicable): Alarm Company: _____ Phone #: _____

6. TELEPHONE NUMBER(S): _____

7. EMERGENCY INFORMATION:

In case of an emergency notify: Full Name: _____ Telephone: _____

Address: _____

8. EMAIL ADDRESS(ES) (also used for your HOA Owner Portal login):

The undersigned hereby authorizes the Association to notify me via electronic means of any Board meetings, Members' meetings, or Committee meetings, pursuant to FL law. The Association shall promptly remove the Member's email address if the Member revokes the Member's consent to receive notice by electronic means.

9. SIGNATURE

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

FOR BOARD USE ONLY

Received on: _____

Welcome Completed on: _____

Board Action _____ Date _____

Board Signature _____ Date _____