LAWRENCE POINTE CONDOMINIUM, INC.

APPLICATION FOR APPROVAL OF SALE OR LEASE

(screening fee of \$150 required)

Made Payable to Sunstate Management

Please strike out the word not applicable herein

Name of (Purchaser/Lessee)		
Name of Lawrence Pointe Owner		
Units to be (Purchasd/Leased)		
Lease period from	to	No. of mos
Present home address of (Purchaser/Lessee)		Phone:
If less than 3 years, prior address		
If tenant – Name and address of Lanc	llord:	
Phone:	Spouse/Partner phone	
Email:	Spouse/P	artner email
Do we have permission to publish you the owner's section: YES NO_	•	per on our password protected website in
Number of people who will be in resi	dence at Lawrence Poir	nte
AdultsChildrenAges of	Children	
Do you plan to make Lawrence Point	e your legal residence?	
Expected duration of yearly residence	y?	
Employment duration of yearly reside	ency	
Employment of Purchaser/Lessee(Pre	esent or retired, last)	
Name of Employer		
Address of Employer		Phone:
Dosition hold		

COPY OF LEASE/PURCHASE AGREEMENT MUST ACCOMPANY APPLICATION

PERSONAL REFERENCES (3)

Please do not include the name of the prospective seller/lessor

1. Name			
Address		Phone:	
2. Name			
Address			
3. Name			
Address			
Are you acquainted with	current Lawrence Pointe owne	rs? If yes, please list.	
BANK REFERENC	ES	SAVINGS	CHECKING
Name and Address of Ba	nk		
Name and Address of Ba	nk		
Prior Bankruptcy? Yes	No		
If yes, explain			
Have you had any crimin	al convictions. If yes, list		
Do you own a pet? Yes_	No		
If yes, please describe			
How Long	Ck. Acct. No	Sav. Acct. I	No
AUTOMOBILE REGISTRA	<u>rion</u>		
Make	Model	Year	
Make	Model	Year	

AUTHORIZATION OF RELEASE OF INFORMATION

Applicant(s) represent that all of the information and statements for purchase or lease are true and complete, and hereby authorize an investigative consumer report including, but not limited to, residential history, employment history, criminal records and credit reports. I am aware that any falsification or misrepresentation of the facts in this application will result in immediate rejection of this application.

Social Security #:		Date of Birth:	
(Personal information will be re	edacted prior to submi	itting for approval to the Board).	
and hereby grants permission to given in this application with the agrees that acceptance as a lesson	the Association to con understanding that all ee does not constitute a	lations of Lawrence Pointe Condominium Association, Inc. tact and follow through with any or all of the references information will be held confidential. The undersigned also approval as subsequent purchaser and that if a lessee does lication for approval as purchaser.	
Dated this	day of	20	
Signature of Applicant		Signature of Co-Applicant	
Initials of Interviewer & Date		Approval by Board Member	
Approval by Board Member			
Approval by Board Member			
Date received by Association	Date		

Signature

I have received and agree to abide by the RULES AND REGULATIONS of Lawrence Pointe Condominium Association. Please return completed application and application fee to:

Sunstate Management Group P.O. Box 18809 Sarasota, FL 34276