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MAYAN TOWERS CONDOMINIUM I

125 South Ocean Avenue Palm Beach Shores, FL 33404 **Tel: (561) 844 4550**

# Fax: (561) 844 9308

**Website:** **MayanTowersSouth@homestead.com**

**Email:** **MayanTowersSouth@4HAssociationManagement.com**

**CONFIDENTIAL APPLICATION FOR UNIT SALE Page 1 of 3**

 Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Owner(s) name:

Contact information:

Unit number:

Mailing Address:

E-Mail Fax #:

Telephone: Best number:

Alternate number:

I would like to be contacted by (Circle one): E-mail or Telephone or Mail Expected Date of Closing:

# A COPY OF THE NEW DEED or OTHER EVIDENCE OF A TRANSFER OF OWNERSHIP IS REQUIRED FOR OUR RECORDS. PLEASE SUBMIT UPON CLOSING.

Unit Sale: Name and Address of Applicant (potential owner):

E-Mail Fax #:

Telephone: Best number:

Alternate number:

I would like to be contacted by (Circle one): E-mail or Telephone or Mail

# APPLICANT: PLEASE FILL IN THE ATTACHED APPLICATION.

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**New Owner’s name:**

**Occupation** (if retired former occupation)**:**

# Business address:

1. Has new owner ever leased in Mayan Towers previously? YES NO

If Yes, what unit number(s)? year(s)?

year(s)?

1. Has new owner ever owned in Mayan Towers previously? YES NO

If Yes, what unit number(s)? year(s)?

year(s)?

# If you are currently an owner – you may skip all of the following questions and sign and date the last page of this application.

1. Please provide 2-3 personal references (not related), if possible use persons at Mayan Towers or in the Palm Beach Area.

Name, Address and Telephone number of references:

1. Residents: Who else is in addition to the applicant will be a resident of the unit? Number? Name Age Relationship
2. **Financial Reference** (Bank and branch address and telephone number)**:**

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1. **Social Security number**
2. **Drivers License number**
3. List all residences applicant has owned or leased in the last 5 years.

# The Applicant must be available for an interview by the screening committee. We prefer to do

**this in person but if this is not possible please provide us with the best time to call.**

Is the applicant available for a personal interview? When?

Best time to call and preferred telephone number?

**APPLICANT:** It is understood that:

* + That the applicant and their guests must abide by the rules of the condominium.
	+ A full set of keys must be left in the Office for use in emergencies.
	+ NO PETS are allowed in the building or on the premises.
	+ The sale of the unit must be pre-approved by the Board or Screening Committee.
	+ A $95 application fee (used to pay for a credit check) must accompany this application.

As an applicant, I understand that the Board of Directors of Mayan Towers Condominium I Association may cause to be instituted an investigation of my background as the Board may deem necessary.

Accordingly I authorize the Board or it’s Screening Committee to make such an investigation and the information contained in this application may be used in such an investigation and the Board of Directors and/or the Screening Committee of the Mayan Towers Condominium I 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 or its Committee.

In asking the foregoing application, I am aware that the decision of the Mayan Towers Condominium I Association will be final and no reason will be giving for any action taken by the board. I agree to be governed by the determination of the Board of Directors and/or the Screening Committee

Applicant’s Signature Date:

# To be filled in by Screening Committee:

Print Name of Committee Chair: Signature

Committee Action: Approved:

Disapproved

Date:

Interested Parties notified on by