

WHISPER CREEK ASSOCIATION
2015-2016 APPLICATION FOR APPROVAL TO PURCHASE OR LEASE A UNIT
C/O Advanced Property Management Service, Inc.
1035 Collier Center Way, Unit #7 Naples, Fl. 34110
Phone 239-513-9433 Fax 239-513-9561
advancedapproval@aol.com

Application for Purchase _____ or Lease _____ Today's Date _____

Closing date _____ Term of Lease _____ to _____

Term of Lease: Minimum of one month, Maximum of one year, per Whisper Creek Documents

Current Owner Name _____ Phone# _____

Current Owner Email Address _____

Unit Address _____

Name of Buyer(s) or Lessee(s) _____

Buyer(s) or Lessee(s) Email Address _____

Current Address _____

City _____ State _____ Zip _____ Own () or Rent () How long? _____

Home Phone _____ Cell Phone _____

Number of persons to be in residence _____

Names of persons to be in residence _____

Type of Pet: _____ Type of Pet: _____

*No Pit Bulls

Applicant Current Occupation _____ Work Phone _____

Co-Applicant Current Occup. _____ Work Phone _____

Have you ever filed bankruptcy? _____ What year? _____

A. Been convicted of a felony? _____ What year? _____ What for? _____

B. Been convicted for being under the influence or dealing in drugs, including alcohol? _____

Year _____

Vehicle Make/Model _____ Yr _____ Color _____ Lic Number _____

Vehicle Make/Model _____ Yr _____ Color _____ Lic Number _____

*Commercial Vehicles Must Be Kept in Garage.

APPLICATION TO INCLUDE FOR APPROVAL:

- **A copy of the purchase contract or lease agreement.**
- **Check or money order in the amount of \$100.00 payable to WHISPER CREEK for transfer fee.**
- **Sale Applications: Check or money order in the amount of \$500 payable to WHISPER CREEK for the capital contribution fee.**

The above MUST all be attached to this application and sent to the ASSOCIATION c/o Advanced Property Management Service Inc., 1035 COLLIER CENTER WAY UNIT #7 NAPLES, FL. 34110. Approval will not be granted if incomplete.

The information as described above must be submitted at least twenty (20) days prior to the intended closing date or starting lease date. *Approval must be received prior to occupancy.*

I/WE DECLARE THE FOREGOING INFORMATION TO BE TRUE AND CORRECT. I/WE UNDERSTAND THE APPLICATION FEE IS NON-REFUNDABLE. I/WE AM/ARE AWARE OF AND AGREE TO ABIDE BY THE DECLARATION OF CONDOMINIUM, ARTICLES OF INCORPORATION, BYLAWS AND ALL PROPERLY PROMULGATED RULES AND REGULATIONS OF THE ASSOCIATION AND ACKNOWLEDGE THAT THE ASSOCIATION MAY TERMINATE A LEASE UPON DEFAULT BY THE TENANT IN OBSERVING ANY OF THE PROVISIONS IN THE DOCUMENTS. I/WE ACKNOWLEDGE RECEIPT OF A COPY OF THE RULES AND REGULATIONS. I/WE UNDERSTAND THE NECESSARY CONFIDENTIAL INFORMATION WILL REMAIN CONFIDENTIAL BY THE ASSOCIATION'S OFFICERS AND/OR THE ASSOCIATION'S DESIGNEE. A **condensed version** of the Whisper Creek rules and regulations are included with this application.

FL Statute 718.116(11) If the unit is occupied by a tenant and the unit owner is delinquent in paying any monetary obligation due to the association, the association may make a written demand that the tenant pay the future monetary obligations related to the condominium unit to the association, and the tenant must make such payment.

Date _____ Applicant Signature _____

Co-Applicant Signature _____

A copy of the approval is to be sent to: _____
(fax, email or mailing address)

APPLICANT DO NOT WRITE BELOW THIS LINE

Application Approved _____ Disapproved _____

By _____ Date _____
Name and Title

Application completed: Yes () No ()

Application Fees Submitted: Yes () No () Check or money order # _____

Copy of sales contract or lease attached: Yes () No () Fees Current: Yes () No ()

Reasons for action taken:
