

Bayfront Place Condominium Association, Inc.

c/o Volhr Corporation
1000 North Collier Blvd., Suite 9
Marco Island, Florida 34145

Phone: (239) 389 – 3600 Fax: (239) 394 – 4110
Email: 2Maintenance@VolhrCorporation.com

Request For Approval Of Sale

To: The Board Of Directors

From Owner(s): _____

You are hereby notified that _____, the owner(s) of Unit # _____
has/have entered into a contract for sale of such unit.

We submit the following information to obtain approval for such sale pursuant to the Articles of the Condominium Documents:

Terms of Offer: _____

Owner's Address: _____

Unit Will Be Titled In The Name Of: _____

Purchaser's Name: _____

Spouse Name: _____

Purchaser's Address: _____

Purchaser's Telephone(s): _____

Purchaser's Occupation: _____

Ages Of Children: _____

Credit References: _____

Personal References: _____

Pet Information: _____

A COPY OF THE SALES CONTRACT IS ATTACHED AS WELL AS A COMPLETED AUTHORIZATION FOR A BACKGROUND/CREDIT CHECK FOR EACH APPLICANT/SPOUSE AS REQUIRED ALONG WITH A NON-REFUNDABLE CHECK FOR \$100.00 FOR THE TRANSFER FEE PAYABLE TO BAYFRONT PLACE.

Purchaser(s) agree(s) to assume any unpaid maintenance charges and assessments, and the Board of Directors will give status of the account on its Certificate of Approval of Sale. Purchaser(s) also agree(s) to bear, or seller agree(s) purchaser shall have credit, for any future adjustments for the current year. Purchaser(s) is/are acquainted with and has/have read the Declaration of Condominium, Articles of Incorporation, By-Laws of Condominium and all current House and Pool Rules and Regulations and agree(s) to be and understand(s) that he/she/they is/are bound by the terms thereof.

WITNESS

SELLER

WITNESS

SELLER

WITNESS

PURCHASER