

**CAMELOT  
CONDOMINIUM ASSOCIATION INC.  
OF MARCO ISLAND**

c/o Volhr Corporation  
1000 North Collier Boulevard, Suite 9  
Marco Island, Florida 34145  
Tel (239) 389-3600 Fax (239) 394-4110  
Email: 2Maintenance@VolhrCorporation.com

**Application for Approval to Purchase a Condominium Unit**

**Instructions:** This application is to be completed by the prospective purchaser(s) and must be submitted to the Association's Manager along with full documentation. Please see the following application checklist seen under 10, for further instructions. Application fee is non-refundable. Approval or denial will be issued within 30 days from the date of receipt of the application.

**1. I hereby apply for approval to:** Purchase (Unit Number) \_\_\_\_\_ and for membership in the Association.

**Unit Will Be Titled In the Name Of:** \_\_\_\_\_

Full name of Applicant: \_\_\_\_\_

Full name of Spouse: \_\_\_\_\_

Home address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone (Home): \_\_\_\_\_ Telephone (Cell): \_\_\_\_\_

Email Address: \_\_\_\_\_

**2. Other family members who may also be occupying the unit, and relationship to applicant:**

Name:

Relationship:

_____	_____
_____	_____
_____	_____
_____	_____

**3. Employer Information**

Company Name: \_\_\_\_\_ Nature of Business: \_\_\_\_\_

City/State: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Co-Applicant Employer Information**

Company Name: \_\_\_\_\_ Nature of Business: \_\_\_\_\_

City/State: \_\_\_\_\_ Telephone: \_\_\_\_\_

**4. Please check intended use of unit:**

☐ Reside here full time ☐ Reside here part time ☐ Lease unit to others

**5. Person to be notified in case of an emergency:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

**6. Automobiles to be parked on the premises:**

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ License Plate# \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ License Plate# \_\_\_\_\_

**7. Mailing address for notices regarding this application if different from the home address given above:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

**8. Background Check:**

I am aware of, and agree, to have a background check  
conducted for each occupant over 18 years of age.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**9. Applicant's Affidavit:**

I am familiar with and agree to abide by the Camelot Condominium Association's Declaration, Bylaws and published Rules & Regulations. I represent that the information stated is factual and correct and I agree that any misrepresentation in this application will justify its disapproval. The Board of Directors shall provide written notice of its decision within thirty (30) days following receipt of this application. Seller and Buyer understand and agree that the Board of Directors shall be under no obligation to divulge any specifics or reasons therefore, seller and buyer herewith surrender any rights or recourse, legal or otherwise, against Camelot Condominium Association, its Board of Directors, or Officers, that may arise as the result of an investigation or disapproval of buyer's application. I consent to any further inquiry concerning this application and the references given. I agree to be available for an interview with the designated representatives of the Association.

It is required that the Association obtains a key or access code to your unit. If you change the locks please provide a copy to Volhr Corporation.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**10. Application Checklist:** Please mail complete package to address on first page.

**Have you attached:**

- ☐ Completed & Signed Pages 1-2 of Application
- ☐ Copy of the Sales Contract
- ☐ Application Fee of \$100 payable to Camelot Condominium Association, Inc. - Non-Refundable
- ☐ Completed Authorization Form for Background/Credit Check for each Applicant/Spouse

***For Office Use Only:***

This application is

☐ Approved ☐ Not Approved

Camelot Condominium Association, Inc. of Marco Island

By \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_