

**LEMON BAY VIEW EAST CONDOMINIUM ASSOCIATION, INC.**

**(A 55+ community)**

Argus Management of Venice, Inc.  
1062 East Venice Avenue ~ Venice, FL 34285  
Phone (941) 408-7413 ~ ArgusVenice.com  
Manager: Melissa Moritz

**APPLICATION FOR SALE**

Unit # \_\_\_\_\_ Present Owner \_\_\_\_\_ Date of Application \_\_\_\_\_

Present Owner's Address: \_\_\_\_\_

Present Owner: Email: \_\_\_\_\_ Phone # \_\_\_\_\_

**Sale Closing Date:** \_\_\_\_\_ **Applicant's Email:** \_\_\_\_\_

**1. Applicant Name:** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Vehicle License #** \_\_\_\_\_ **Vehicle Make/Model/Year:** \_\_\_\_\_

**Driver's License #** \_\_\_\_\_

**2. Applicant Name:** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Vehicle License #** \_\_\_\_\_ **Vehicle Make/Model/Year:** \_\_\_\_\_

**Driver's License #** \_\_\_\_\_

**Pet Information:** \_\_\_\_\_

(25 lbs. weight limit)

**Persons to occupy unit other than purchasers:**

(Name)	(DOB)	RELATIONSHIP
1. _____	_____	_____
2. _____	_____	_____

**Three personal references required:**

(Name)	(Address)	Phone #
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

1. This application must be completed in full and filed with the Association **30 days prior** to the closing date with a \$50.00 processing fee. Please make check payable in U.S. Funds to: Lemon Bay View East Condo. Assn., Inc.
2. Owner/Applicant/Occupants **must read and agree** to abide by all condominium By-Laws, Declaration, Rules and Regulations, and decisions of the Board, and indicate such by signing below.
3. Owner/Applicant/Occupants agree to and authorize the release of investigative reports as required by the Board of Directors.
4. **A copy of photo identification MUST be submitted** with this application for all new owners who will occupy the unit.
5. The Association's Submerged Lands Lease requires with each transfer of a unit that the Association receive a State of Florida sales fee calculated per State formula for the value of the assigned boat slip. The Association shall invoice and collect this fee by way of the estoppel certificate provided to the closing agent or if the unit transfers without a closing agent, then directly from the buyer/seller. The Association shall promptly report to and transmit the money paid to the State of Florida Board of Trustees of the Internal Improvement Trust Fund as required by the Submerged Lands Lease.

Signatures:

Present Owners: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant(s) \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

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

\_\_\_\_\_ Date \_\_\_\_\_

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**New owners - Please be sure to obtain all keys, set of condominium documents, etc., from seller as the Association is not responsible for providing these items.**  
**Owners may obtain a copy of the Articles of Incorporation, Declaration of Condominium, By-Laws and Rules from management at a cost of \$35.00**

Board of Directors                      Form Submitted by: \_\_\_\_\_

Date: \_\_\_\_\_                      Phone # \_\_\_\_\_

Approved by Board of Directors on this date: \_\_\_\_\_

\_\_\_\_\_  
 (Signature)

