

Sea Villa Apartments, Inc.

MANAGED BY: ARGUS MANAGEMENT OF VENICE, INC.
1062 EAST VENICE AVENUE ~ VENICE, FL 34285
OFFICE: 941-408-7413 ~ FAX: 941-408-7419
www.argusvenice.com

Sale Application

It must include a copy of Driver's license for ALL residents over 18 years of age, and a Non-Refundable Application fee of \$150.00, made payable to: Sea Villa Apartments

Return this application to Argus Management of Venice, Inc., 1062 East Venice Avenue, Venice, FL 34285.

Sale ___ Mortgage Type _____ Closing Date _____

Present Owner: _____

Title Co: _____

Unit Address: _____

Full-Time Residence? YES NO Realtor / Lease Manager
Name and Phone: _____

Full Name: _____ Date of Birth: _____
Last First M.I.

Phone: _____ Email _____

Driver License #: _____ Social Security: _____ Employer: _____

Full Name: _____ Date of Birth: _____
Last First M.I.

Phone: _____ Email _____

Driver License #: _____ Social Security: _____ Employer: _____

Present Address: _____
Street Address City, State, Zip

Previous Address: _____
Street Address City, State, Zip

Other Occupants: _____

Name and Date of Birth of all other occupants under 18 years of age. (If over 18 use additional application.)

Pet(s): _____
Breed Weight

Vehicle 1: _____
Make Model State License Plate #

Vehicle 2: _____

Make

Model

State

License Plate #

List any additional vehicles on a separate sheet.

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IF THIS APPLICATION IS INCOMPLETE, IT WILL BE RETURNED TO APPROPRIATE PERSON OR AGENT
PLEASE USE AN ADDITIONAL APPLICATION FOR MORE THAN TWO RESIDENTS OVER THE AGE OF 18

Sea Villa Apartments

c/o Sunstate Association Management, Inc. P.O.
Box 18809, Sarasota, FL 34276
Office 941-870-4920 | Fax 941-870-9652
Email: info@sunstatemanagement.com

References

Please list references.

Full Name: _____ Relationship: _____

Address: _____

Phone:

Full Name: _____ Relationship: _____

Address: _____ Phone: _____

Previous Landlord / Mortgager: _____

Address: _____ Phone: _____

Authorization of Release of Information

Applicant(s) represent that all the information and statements for purchase or lease are true and complete, and hereby authorize an investigative consumer report including, but not limited to, residential history, employment history, criminal records, and credit reports. I am aware that any falsification or misrepresentation of the facts in this application will result in immediate rejection of this application.

Signature: _____ Date: _____

Signature: _____ Date: _____

Disclaimer and Signature

The undersigned has received a copy of the Association Documents: By-Laws and the Rules and Regulations of Sea Villa Apartments and agrees to abide by them.

Signature: _____ Date: _____

Signature: _____ Date: _____

Action By Board of Directors

YES NO

Interview _____ Background _____

Application Approved Board

Signature: Date:

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