SARATOGA BAY HOMEOWNERS ASSOCIATION, INC. PO Box 222486

West Palm Beach, Fl. 33422

APPLICATION FOR CERTIFICATE OF APPROVAL OF SALE

\$100.00 Application Fee Required

Date		Lot:	
INFO Please print cle		NCERNING APPLICANT(S)	
Name:			
Email address:			
Cell Phone#			
Additional Phone	e#	(work)	
Driver's License	No. & State		
Do you intend to Spouse's Name:	occupy the home?		
Cell Phone#		Email address	
Names of childre	en residing in home	e:	
Occupants in the	e home other than i	immediate family:	
-		Relation:	
Name:		Relation:	

Make of venicle:	Iype: Car [SUV [Iruck [I ag. No
Make of Vehicle:	Type: Car [] SUV [] Truck [] Tag. No
Make of Vehicle:	Type: Car [] SUV [] Truck [] Tag. No
There is <u>no</u> overnight p	parking on the street, except for guests.
Please list all pets:	
Dogs: # Breed	Dogs: # Breed
Cats: #	
There is a limit of <u>two</u>	pets per household.
Nearest Relative in case	e of emergency:Relationship:
Phone #: ()	Relationship:
Address:	
I (XXI.) (* 11 41	
	nvestigation of all answers and references given.
Initial	Initial
I (We) hereby soree to	abide by all the Governing Documents including the
. ,	of Saratoga Bay Homeowners Association, Inc. a copy
_	m the seller and reviewed also on our community
website	in the sener and reviewed also on our community
www.Saratogabay.com	
www.sai atuganay.Cuii	
Initial	Initial

I UNDERSTAND THAT THIS PROPERTY CANNOT BE LEASED OR RENTED FOR A PERIOD OF TWENTY FOUR MONTHS AFTER THE DATE OF PURCHASE.

Owner agrees that the terms of the <u>attached fully executed "Contract of Sale"</u> are within the requirements of Saratoga Bay Homeowners Association Rules and Regulations pertaining thereto.

All assessment billing and official mail should be sent to: