



APPLICATION FOR PURCHASE, GIFT, DEVISE OR INHERITANCE

The proposed purchaser must complete & return:

1. This application for the Glades Golf & Country Club Association Inc.
2. A copy of the Sales Contract
3. A filing transfer fee of \$150.00 (non-refundable) per applicant (immediate family/reside in same household considered one applicant) payable to The Glades Golf & Country Club Inc.

Co-Ownership, Corporation, Partnerships or Trust shall designate a primary occupant in writing in the Primary Occupant section of this application.

Application must be completed and received by the office at least 20 days prior to closing. Applicants must be available for a personal interview if requested.

All pets must have prior approval. The Standing Rules & Regulations only allow for 1 pet of normal household type less than 25lbs. We will also require proof of current vaccinations.

Trucks are prohibited if they exceed one half ton load capacity.

Occupancy regulations:

One bedroom- no more than 2 permanent occupants

Two bedrooms- no more than 4 permanent occupants

Three bedrooms- no more than 6 permanent occupants

PURCHASE INSTRUCTION AGREEMENT

1. In making the forgoing application, I represent to the Board of Directors that the purpose of the purchase of this Glades Condominium is as follows (check one):
 Permanent Resident Seasonal Resident Rental/Investment
2. I hereby agree for myself, and on behalf of all persons who may use the condominium which I seek to purchase, that I will abide by the Rules & Regulations, which are, or may in future be imposed by the Glades Golf & Country Club Association and its Board of Directors.
3. I have received a copy of the Condominium Documents, Year End Financials, Pertinent Information, FAQ Sheet & Standing Rules & Regulations (check one):
 YES NO
4. I understand that the Administration Office will advise me within twenty (20) days of either acceptance or denial of this application.

5. If this application is accepted, I will provide a copy of the Closing Statement and a copy of the recorded Warranty Deed within ten (10) days after closing.
6. I understand that there are restrictions on pets and that I may not bring a pet into The Glades nor acquire one, either temporarily or permanently after occupancy, without prior Association approval.
7. I understand that the acceptance for purchase of a condominium at the Glades is conditioned upon the truth and accuracy of this application and upon the approval of the Board of Directors. Occupancy prior to approval is prohibited. Any misrepresentation or falsification of information on these forms will result in the automatic rejection of this application.
8. I understand the Board of Directors of the Glades Condominium Association may institute a background check. Accordingly, I specifically authorize the Board of Directors, or their agent, to make such investigation and agree that the information contained in this and the attached application may be used in such investigation, and the Board of Directors and Officers of the Glades Condominium Association itself shall be held harmless from any action or claim by me in connection with the use of the information contained herein or any investigation conducted by the Board of Directors.

In making the attached application, I am aware, and agree, the Board of Directors will govern the Glades Condominium Association.

Applicant Signature

Applicant Signature

Date

Date

RESALE APPLICATION & APPOINTMENT OF PRIMARY OCCUPANT FORM

Glades Golf & Country Club Association Inc.

174 Teryl Road

Naples, FL 34112

Phone (239) 774-6899 Fax (239) 774-2002

Please Print

Name of Applicant: _____ DOB: _____

Social Security or Social insurance # _____

Name of Co-Applicant: _____ DOB: _____

Social Security or Social Insurance # _____

Minor Children living with you

Name: _____ DOB: _____

Name: _____ DOB: _____

Current Mailing Address: _____

City, State & Zip: _____

Phone Numbers (Home, Cell, Work): _____

Email address: _____

Residence History

Previous Residence (if current address is less than 5 years): _____

Dates of Residency: _____

Mortgage Holder: _____

Glades Address to purchase: _____

Closing Agency (Name & Address): _____

Date of Closing: _____ Purchase Price: _____

Please enter the Name(s)/Trust/Corporation **exactly** how it will appear on the deed:

Character References

Name: _____

Phone: _____

Name: _____

Phone: _____

Vehicle Information

Each owner is entitled to one parking space within the common elements. However, there is no *assigned* parking space. Collectively, two vehicles are permitted per condominium unit. No trucks that exceed one half ton capacity are allowed. Please reference the Standing Rules & Regulations for detailed vehicle information.

Make: _____

Model: _____

Year: _____

Color: _____

Tag #: _____

State: _____

Make: _____

Model: _____

Year: _____

Color: _____

Tag #: _____

State: _____

Permission for Pet

Each owner is entitled to one pet of normal household type, not to exceed 25lbs. Please describe your pet: _____

Collier County Ordinance states that all animals must have rabies inoculations once a year. A copy of the current vaccination record must accompany this application. You are responsible for updating vaccination records when vaccinations are repeated, or booster inoculations are required. County ordinance also prohibits dogs whose barking is a nuisance. All pets must be walked on a leash on common grounds, medians and grassy areas away from mailboxes, pool areas, patios, golf courses and flower beds. No pets are permitted to run loose on the property of the Association at any time. An owner is responsible for cleaning up after their pet defecates on any Glades property.

Applicant Signature: _____

Date: _____

Co-Applicant Signature: _____

Date: _____

For Office Use Only

Date Received: _____

Pet Permission: Y / N / NA

Transfer Fee paid by: _____

Check #: _____

Sales Contract: Y / N

Administration: _____

Date: _____

Current / Past Due / Other

Director: _____

Date: _____

Approved / Denied