



c/o Sunstate Management Group, Inc.  
P.O. Box 18809, Sarasota, FL 34276  
Tel: 941.870.4920 / Fax:  
941.870.9652

Return this application to Sunstate Association Management Group, Inc., PO Box 18809 Sarasota, FL. 34276 or email to [allapplications@sunstatemanagement.com](mailto:allapplications@sunstatemanagement.com) . You 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 Sunstate Association Management Group, Inc. Application will not be processed until all required documentation and fee(s) have been received.

Email to: [allapplications@sunstatemanagement.com](mailto:allapplications@sunstatemanagement.com)

### SALE APPLICATION

DATE \_\_\_\_\_

TO: THE BOARD OF DIRECTORS OF Gulfview Estates Homeowners Assoc., Inc.

THE PREMISES LOCATED AT: \_\_\_\_\_

THE CURRENT OWNERS ARE: \_\_\_\_\_

CLOSING DATE: \_\_\_\_\_ REALTOR: \_\_\_\_\_ PHONE/EMAIL: \_\_\_\_\_

I/WE (**Buyer**) HAVE RECEIVED AND READ THE DECLARATION OF COVENANTS & RESTRICTIONS, THE ARTICLES OF INCORPORATION AND THE BYLAWS OF THE ASSOCIATION AND I/WE UNDERSTAND MY/OUR RESPONSIBILITIES AS AN OWNER(S) & I/WE AGREE TO ABIDE BY THE PROVISIONS OF SAID DOCUMENTS WHERE APPLICABLE:

Y \_\_\_\_\_ N \_\_\_\_\_

I/WE (**Buyer**) HAVE RECEIVED AND READ THE EC&R's ADOPTED BY THE ASSOCIATION: Y \_\_\_\_\_ N \_\_\_\_\_

FULL NAME OF BUYER \_\_\_\_\_

FULL NAME OF SPOUSE/CO-BUYER \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_

TELEPHONE: HOME \_\_\_\_\_ WORK \_\_\_\_\_ CELL \_\_\_\_\_

E-Mail Address \_\_\_\_\_

PET THAT WILL BE KEPT AT THE RESIDENCE: Type of Pet: \_\_\_\_\_ Weight: \_\_\_\_\_ **All pets must be leashed and not allowed to run free. You must pick up after your pet and Sarasota leash laws will be enforced.**

MAKE, MODEL AND YEAR OF VEHICLES: \_\_\_\_\_

MAKE, MODEL AND YEAR OF VEHICLES: \_\_\_\_\_

\_\_\_\_\_  
**BUYER (SIGNATURE)**                      **DATE**

\_\_\_\_\_  
**BUYER (SIGNATURE)**                      **DATE**



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## RESIDENT OCCUPANCY SHEET FOR DIRECTORY AND EMAIL USE PERMISSION

Please provide the information listed below to ensure that we can contact you if there is an emergency and to update our records. Kindly return this form to Sunstate Management, P.O. Box 18809, Sarasota, FL 34276, or email directly to [databasechanges@sunstatemanagement.com](mailto:databasechanges@sunstatemanagement.com) for changes throughout the year updating us with your current information.

**PLEASE SPECIFY ONE MAILING ADDRESS**

OWNER: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

LOCAL PHONE#: \_\_\_\_\_

USE AS MAIN MAILING ADDRESS \_\_\_\_\_

EMAIL: \_\_\_\_\_

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NORTHERN MAILING ADDRESS: \_\_\_\_\_

NORTHERN PHONE #: \_\_\_\_\_

USE AS MAIN MAILING ADDRESS \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Tel. #: \_\_\_\_\_

July 1, 2010, the Florida Legislation enacted a new law governing the publication of owner personal information such as phone numbers, email addresses and alternate addresses. Please indicate below if you do or do not want this information published in the annual owner roster (check one) and sign.

I do want this information published.

I do not want my e-mail address published in the annual roster, but I do give authorization to the Board of Directors or their management designee to contact me by e-mail.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date