

**APPLICATION FOR APPROVAL TO PURCHASE A
CONDOMINIUM UNIT**

[] I / We hereby apply for approval to purchase unit _____ in ARDISSONE, a condominium, and for membership in the Condominium Association. A complete copy of the signed purchase agreement is attached.

In order to facilitate consideration of this application, I represent that the following information is factual and correct, and agree that any falsification or misrepresentation in this application will justify its disapproval. I consent to your further inquiry concerning this application, particularly of the references given below. The Association's Governing Documents and Rules and Regulations can be found on the www.ArdissoneNaples.com.

PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION:

Full name of Applicant: _____

Current Address: _____

Primary Phone: _____ Second Phone: _____

Email Address: _____

Full Name of Co Applicant: _____

Current Address if different: _____

Primary Phone: _____ Second Phone: _____

Email Address: _____

Is Co Applicant the Spouse of the Primary Applicant? Yes _____ No _____

If not, who will be the designated Primary Occupant? (Section 14.1B of Declaration)

Is Applicant and/or Co Applicant currently employed? Yes _____ No _____

If Yes, Name of company: _____

Company's Website: _____

If Retired, what is the nature of the former business or profession? _____

Will the Unit be owned by a corporation, partnership or Trust? Yes _____ No _____

If yes, list the name, address and phone number of entity. _____

Address: _____

Phone: _____

Name of Primary Occupant: _____

Address if different than above: _____

Phone if different than above: _____

Anticipated Settlement Date: _____

Vehicles: Each unit is assigned two parking spaces. Vehicles to be kept at condo: See Section 12.11 of the Declaration.

Type _____ License _____ State _____

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Is either vehicle an electric vehicle? Yes _____ No _____

If yes please reference Section 12.12 of the Declaration and the Rules and Regulations regarding electric vehicles.

Will the Applicant(s) reside here full time? _____ Part time? _____ Lease the unit? _____

If the plan is to lease the unit, please refer to Section 13 of the Declaration regarding leasing of units.

Is there a boat slip attached to the unit being purchased? Yes _____ No _____

If yes, please see Section 8.1 (D), 8.3, 12.10 of the Declaration and the Rules and Regulations regarding boat slips and boat lifts.

Description of boat _____

Will you have a pet or pets? Yes _____ No _____

If yes, see Section 12.6 of Declaration and Rules and Regulations regarding pets.

Do you know a current or former owner of the Ardissonne? Yes _____ No _____

If yes, what is their name? _____

Have you ever leased a unit at the Ardissonne? Yes _____ No _____

If yes, when? _____

Section 14.3(c) lists the reasons why the Board may withhold approval of this Application. Do any of these reasons apply to Applicant or Co-Applicant, or to this application? Yes _____ No _____

If yes, please provide a brief explanation. _____

Does Applicant intend to make significant alterations in the near future? Yes _____ No _____

If yes, please refer to Section 11 of the Declaration, Contractor Rules and Regulations, and the Unit Improvement Forms. Major construction of a unit interior may only be done between May 1 and October 31.

I/We am aware of and agree to abide by the Declaration of Condominium of Ardissonne, the Articles of Incorporation, Bylaws and any and all properly promulgated Rules and Regulations; I acknowledge receipt of a copy of the Association Rules.

The prospective purchase will be advised by the Association office within a 30-day period from the date of the application whether this application has been approved.

Please include the following;

Copy of the Sales Contract

Applicants Driver's License if 18 and older

A non-refundable check or money order for the application fee of \$100 made payable to Ardissonne Condominium Association.

A non-refundable check or money order of \$75 for the processing fee made payable to ADG4 Companies per applicant 18 and older.

Date: _____

Applicant Signature: _____

Applicant Signature: _____

Application Approved _____

Disapproved: _____

Date: _____

By Officer or Director: _____

We would like to update Ardisone Condominium Association records. Please complete the information requested below and return it to our Office. Florida Statute for Condominiums states for owner information to be included in a published directory; the below authorization must be completed, signed, and dated. **If we do not receive a signed form, your information will not be included in the next directory update.** Thank you.

Name _____
Naples _____ Unit No. _____
Northern/Other Address: _____
Naples Phone: _____ Business Phone _____

REQUEST AND AUTHORIZATION TO BE LISTED IN ASSOCIATION OWNER DIRECTORY

I/We the undersigned Owners of Unit _____ in Ardisone Condominium Association, hereby authorize our name, address, email address, and telephone number to be published in the Association owner directory. I/We understand that the directory will be distributed to all Owners.

Sign Name _____ Date _____

Print Name

Sign Name _____ Date _____

Print Name

