## SOUTHWINDS AT THE MOORINGS

Purchase Application c/o Keystone Property Management Group, Inc. 780 US Highway 1, Suite #300 Vero Beach, FL 32962

Current Owner:	Bldg. No.	Apt. No	
Name of Applicant:			
Present Address:	Phone:_		
City:	State	Zip Code:	
Phone number:	Email:		
Previous Address:	Phone:		
City:	State:	Zip Code:	
Present Occupation:			
Business Address & Phone:			
Ifretired, former occupation (company	'):		
Applicants Club Affiliations – past & pre	esent		
Colleges Attended: Social References: including phone # _ Business &/or Bank References:			
Contact Information: Phone	Email		
Name of Spouse (Co-Applicant):			
Present Address:	Phone:		
City:	State	Zip Code:	
Phone Number:	Email:		
Previous Address:	Phone:_		
City:	State:	Zip Code:	
Present Occupation :			
Business Address & Phone:			
If retired, former occupation:			
Applicants Club Affiliations – past & pre	esent		
Colleges Attended:			
Social References: including phone # _			
Business and/or Bank References:			
Contact Information: Phone		Email	

The applicant(s) agree to abide by the terms, conditions and provisions of the Declaration of Condominium, the Articles of Incorporation, the Bylaws and the Rules and Regulations of the Southwinds at the Moorings Association, Inc.

I/We have received and read the Rules and Regulations for Southwinds at the Moorings Association, Inc.

I/We have received the Association's Documents -Articles of Incorporation, Bylaw's and Declaration of Condominium.

	Date:	
Applicant		
	Date:	
Spouse/Co-Applicant		
	Date:	
Seller		
	Date:	
Seller		
nt:		Phone
	Spouse/Co-Applicant  Seller  Seller	Applicant  Date:  Spouse/Co-Applicant  Date:  Seller  Date:  Date:

## Fees due with each application:

**\$100.00 -** check made payable to Southwinds at the Moorings Association, Inc. **\$50.00 -** check made payable to Keystone Property Mgmt.

Please include a copy of the Sales Contract

This application must be received by the Association at least 30 days prior to occupancy, and in no event shall a unit be occupied prior to the approval of this Application by the Board of Directors.

All required information must be completed. Any application received containing errors or missing required information will be returned to be amended. Processing will not begin until corrections are made and received by Keystone.

Application received on:		
Approved by:	Title	
Date of Board or Committee Meeting:		

NOTE: No dogs are permitted in Buildings 2, 3, 4, 5 and 6.