

**Tequesta Garden Condominium Association, Inc.**

**HOUSING FOR OLDER PERSONS**  
**SALES APPLICATION**

Unit Address: \_\_\_\_\_ Current Owner(s): \_\_\_\_\_

Buyer(s): \_\_\_\_\_

Current mailing address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Realtor name: \_\_\_\_\_ Company: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Are you using a lawyer? \_\_\_\_\_ Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Please give two personal references:

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

An interview with a Tequesta Garden Association Board member and the Building Representative for the building is required before closing. Please give us a time and date most convenient for you:

\_\_\_\_\_

A copy of the Tequesta Garden Association Declaration of Condominium By-Laws and Amendments will be provided by the Seller, see additional page for receipt of documents.

I acknowledge that I take title to this housing unit subject to the Tequesta Garden Condominium Association, Inc. documents and agree to abide by them without reservation.

Signature: \_\_\_\_\_

Buyer

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Buyer

Date: \_\_\_\_\_