# Strathmore Gate East at Lake St. George Homeowner's Association, Inc. A Deed Restricted Community

### **APPLICATION TO PURCHASE**

Note: Application must be submitted 21 days prior to occupancy for Board approval

A background check is required of all applicants

## \$100.00 APPLICATION FEE

## Note: There is a (1) one year waiting period for owners to rent out the unit after purchase.

### PLEASE PRINT CLEARLY

Property to be Purchased:		Closing Date: _	
Current Owner:		Home Tele #:_	
Current Owner's Address in	f Different:		
Cell/Work Tele:			
Personal Data of Purchase	r(s) Name(s):		
(1)		Phone Contact No	
(2)		Phone Contact No	
Present Address:			
Email Address:			
Fmployment: Name and A	ddress:		
		_	Геlерhone #
Other Adults Living in Unit	:		
Name:		Relationship:	Age:
Name:		Relationship:	Age:
Children To Live in Unit:			
Name:	Age:	Name:	Age:
Name:	Age:	Name:	Age:
16 hava waa da wale wasi	dad at Stuathuraus Cata Fact list	adduses.	
ii you nave previously resi	ded at Strathmore Gate East, list	address.	<del></del>
Pet Information: (Note: F	Pets require written Board appro	val. All rules are strictly enfo	rced).
Type of Animal:	Breed:		Weight:
Type of Animal:	Breed:		Weight:
Vehicle Information:			
Tag #	Make/Model		Year:
Tag #	Dales /Dasalal		Vacuu

No boats, trailers, Rvs, campers, motor homes,	motorcycles or commercial vehicles are permitted on property overnight.
Purchase Data: Price Paid for Unit: \$	
Realtor:	Telephone:
Address	
(If Realtor is not involved, please list name, etc	of person handling closing:
Attorney (if applicable):	
Title Company, Etc.	
Purchaser - Do you intend to:	
dwelling and not just a portion thereof and for owner must submit an <u>application for lease</u> an	emi-annually:Lease Unit: Lease is to be written for entire a term of not less than seven (7) months. If the unit purchased is to be leased, the dobtain written Board approval 21 days prior to the finalization of the lease.
(At end of Lease, If lease is renewed, Please No	otify Management)
If you plan to reside in SGE only part of the yealiving off-property.	ar, we may need to contact you with Strathmore Gate East business while you are
List other address:	
	E-mail:
Telephone Number:	Cell #
Documents and Agreement (A background ch	neck is required of all applicants)
I understand that Strathmore Gate East is a de	ed-restricted community and I agree to abide by the documents and Rules and
Regulations.	
	eived a copy of the Official Documents of the Homeowners' Association.
Signature:	<del></del>
<del>-</del>	of the Association. All fees and assessments by the Association are due and payable the designated payee. Delinquent fees are subject to a lien on property.  If fee is: \$
Mail Completed Applications for Board Ap	proval to:
Telepho	one: (727) 726-8000 FAX: (727) 723-1101
	eri-Tech Property Management, Inc.
247	01 U.S. Highway 19 North, Suite 102 Clearwater, FL 33763
Signed Copy of SGE Board of Directors App	proval for Sale to be emailed to (provide email address):
Title Company:	Realtor:
Homeowner:	
	Date:
Angela Johnson, LCAN	A, Acting as Agent for Strathmore Gate East HOA, Inc.

CUSTOMER NUMBER	
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## **TENANT INFORMATION FORM**

I / We	, prospective
tenant(s) / buyer(s) for the property located at _	,
Managed By:	Owned By:,
,	inquire into my / our credit file, criminal, and rental history as well as any other personal understand that on my / our credit file it will appear the TENANT CHECK LLC has made at may arise against TENANT CHECK LLC now or in the future.

### PLEASE PRINT CLEARLY

<b>TENANT INFORMATION:</b>	<b>SPOUSE / ROOMMATE:</b>
SINGLE MARRIED	SINGLE MARRIED
SOCIAL SECURITY #:	SOCIAL SECURITY #:
FULL NAME:	FULL NAME:
DATE OF BIRTH:	DATE OF BIRTH:
DRIVER LICENSE #:	DRIVER LICENSE #:
CURRENT ADDRESS:	CURRENT ADDRESS:
HOW LONG?	HOW LONG?
LANDLORD & PHONE:	LANDLORD & PHONE:
PREVIOUS ADDRESS:	PREVIOUS ADDRESS:
HOW LONG?	HOW LONG?
EMPLOYER:	EMPLOYER:
OCCUPATION:	OCCUPATION:
GROSS MONTHLY INCOME:	GROSS MONTHLY INCOME:
LENGTH OF EMPLOYMENT:	LENGTH OF EMPLOYMENT:
WORK PHONE NUMBER:	WORK PHONE NUMBER:
HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO	HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO
HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO	HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO
SIGNATURE:	SIGNATURE:
PHONE NUMBER:	PHONE NUMBER:

#### **IMPORTANT**

Please complete this form and return it to Ameri-Tech with your owner/tenant application. Applications received without this form will not be processed.

IF THE WRONG SOCIAL SECURITY NUMBER IS SUBMITTED, A SECOND APPLICATION FEE WILL BE CHARGED TO RE-PULL THE REPORT.

A CREDIT REPORTING SERVICE PROVIDING CREDIT REPORTS FOR REALTORS / PROPERTY MANAGERS / APARTMENT COMPLEXES / MOBILE HOME PARKS / CONDOMINIUM ASSOCIATIONS / EMPLOYERS

## STRATHMORE GATE EAST HOMEOWNERS ASSOCIATION

### ACKNOWLEDGEMENT OF ASSOCATION DOCUMENTS

I acknowledge I have read and understand the documents of Strathmore Gate East Homeowners Association, including but not limited to the below.

- 1. Strathmore Gate East Declaration of Restrictions
- 2. Strathmore Gate East Rules and Regulations
- 3. Strathmore Gate East By-Laws

All unit occupants over the age of 18 sign below.

4. Strathmore Gate East Articles of Incorporation

I do hereby agree that I will abide by the rules and regulations in these documents. I understand that not abiding to the Rules and Regulations could result in a fine.

Unit Address: