

# Meadowlark Cove

## Homeowners Association, Inc.

c/o Hayden & Associates  
12650 Whitehall Drive  
Fort Myers, Florida 33907  
Ph: 239-489-4890 Fax: 239-489-4980

### \*\*\*Sale Application\*\*\*

This application must be submitted along with a non-refundable processing fee of \$100.00 to the Board of Directors via Hayden & Associates. A minimum of 30 days processing time is required prior to the start of any sale closing. A copy of the lease/sales contract must be included with the application and a copy of each applicant's driver's license. Applicant will be responsible for submitting a national criminal background check on all applicants over the age of 18 yrs. Make checks payable to Hayden & Associates.

### NO NEW TENANTS OR OWNERS MAY MOVE INTO MEADOWLARK COVE WITHOUT PRIOR APPROVAL OF THE BOARD OF DIRECTORS.

Address & Unit # \_\_\_\_\_

Present Owner \_\_\_\_\_ Phone # \_\_\_\_\_

Owner's Address \_\_\_\_\_

**Personal Information:**                      Applicant                      Spouse/Co-Applicant

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

Email Address: \_\_\_\_\_

Vehicle (s): \_\_\_\_\_

Year/Make/Model \_\_\_\_\_

Will anyone other than those listed above occupy this unit? \_\_\_\_\_ No \_\_\_\_\_ Yes

If Yes, whom? \_\_\_\_\_

### **Pets (Maximum 2 pets ONLY)**

Pets? If yes, Breed & Weight? \_\_\_\_\_

### **Residential History:**

Present Address: \_\_\_\_\_

How long? \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Emergency contact:**

Name/Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

**References: (2) – Please give names, addresses, and phone numbers:**

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

Approval:

Board Member/Agent: \_\_\_\_\_ Date \_\_\_\_\_

If application is denied, give reason: \_\_\_\_\_

\_\_\_\_\_

\*\*\*Approval will be based on the Condition that all Outstanding Monetary Obligations Due and Owing to Association are Paid in Full at or Prior to Closing. \*\*\*