

Cedar Pointe Village 1-5 Association, Inc.
2929 SE Ocean Blvd – Clubhouse 1, Stuart, FL 34996
772-286-9987 ~ CPV15@BellSouth.net

Unit # _____

**Purchase Application
Check List**

Please be aware that this is a 55+ condo community, with **many** Rules that will be enforced.

It is **not** low-income or subsidized housing.

All items must be submitted or your application will be considered incomplete.

Misrepresentation, falsification or incomplete information may disqualify or delay the application.

This form must be submitted with all other necessary paperwork.

General submission requirements

1. Fully executed application

NOTE: U.S. Service member applications will be processed and notified within 7 days of submission.

2. Fully executed sales agreement

3. \$100 Application fee (non-refundable) Make check payable to Cedar Pointe Village 1-5 Assoc.

4. Include a Credit Bureau Credit Report, not more than 3 months old, for each applicant.

5. Driver's License or Photo ID

Title Company Infor for Sale/Purchase

Company Name: _____

Company Address: _____

Company Phone: _____

Company Email: _____

Buyer's Realtor Info for Sale/Purchase

Company Name: _____

Company Address: _____

Company Phone: _____

Company Email: _____

Seller/Current Owner Realtor's Infor for Sale/Purchase

Company Name: _____

Company Address: _____

Company Phone: _____

Company Email: _____

Certificate of Approval delivery option (Mark X by delivery option.)

____ Mail original to Title Company and email copy to _____

____ Mail original to Buyer's Realtor and email copy to _____

____ Mail original to Seller's Realtor and email copy to _____

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Purchase Application
Instructions

The Association shall review the application within 30 days of receipt of required information, documents and fees. Please ensure all required items are submitted as a complete package – incomplete packages will not be processed. A Certificate of Approval will be issued to the designated recipient.

APPLICANT must submit:

1. Fully executed application
2. Fully executed sale agreement
3. \$100 Application fee (non-refundable) Make check payable to Cedar Pointe Village 1-5 Assoc.
4. Include a Credit Bureau Credit Report, not more than 3 months old, for each applicant.
5. Driver's License or Photo ID

Please note:

- Animals of any kind are not allowed.
- ONE PARKING space only – per unit.
- If Leasing - all leases must be for a minimum of 90 days and maximum of 12 months. Leases for less than three (3) consecutive months or for more than twelve (12) months are prohibited.
- Submit information timely – Board of Directors approval is required and can take 30 days.
(U.S. Service member applications will be processed and notified within 7 days of submission.)
- A Personal Interview is required and they are scheduled about twice a month.
- Misrepresentation, falsification or incomplete information may disqualify or delay application.

All items must be submitted as an entire packet to:

Cedar Pointe Village 1-5 Association
2929 SE Ocean Blvd, Clubhouse 1
Stuart, FL 34996

Thank you for correctly following the procedures.

*If you have any questions please call the Cedar Pointe 1-5 Office 772-286-9987 or
Coastal Property Management 772-600-8900.*

Every effort will be made to expedite the notification process.

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Purchase Application

Date of Application _____ Property Address: 2929 SE Ocean Blvd, Stuart FL 34996 Unit #: _____

Close Date : _____ Move-in Date: _____

APPLICANT

Name: _____ Email: _____

Present Address: _____ City _____ State _____ Zip _____

Phone: Cell _____ Home _____ Business _____

Active Service Retired Employed Dates from _____ to _____

Employer Name _____ Position _____ Phone _____

Employer Address _____

CO-APPLICANT: _____ Email: _____

Present Address: _____ City _____ State _____ Zip _____

Phone: Cell _____ Home _____ Business _____

VEHICLE RESIDING AT UNIT

Make _____ Year _____ Model _____

Number people residing in the unit _____

EMERGENCY CONTACT INFORMATION

Name _____ Relationship _____ Phone # _____

Name _____ Relationship _____ Phone # _____

PERSONAL REFERENCES

1. Name: _____ Email: _____

Present Address: _____ City _____ State _____ Zip _____

Phone: Cell _____ Home _____ Business _____

2. Name: _____ Email: _____

Present Address: _____ City _____ State _____ Zip _____

Phone: Cell _____ Home _____ Business _____

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In the event that approval is granted by the Board of Directors of the Cedar Pointe Village 1-5 Association, Inc., the undersigned hereby **agrees to abide by** the Articles of Incorporation, Declaration of Condominium, Restrictions, By-Laws, Guidelines, all covenants, conditions, rules and regulations as set forth, as now or hereafter amended, and any additional covenants, conditions, rules and regulations as may be imposed from time to time by the Board of Directors or the members of the Cedar Pointe Village 1-5 Association Inc., Should owner have guests, owner ensures that guests are familiar with the Rules and Regulations and abide by them.

In the event that approval is granted by the Board of Directors, the undersigned hereby agrees to abide with the above stated.

Owner Signature

Co-Owner Signature

Print Name

Print Name

Date Submitted: _____

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Prospective Owner Authorization
(for Background & Credit Check)

The undersigned being a new owner applicant(s) of the following address:

2929 SE Ocean Blvd, Stuart FL 34996 Unit #: _____

I/We hereby authorize Cedar Pointe Village 1-5 Association and Coastal Property Management and its agents to conduct a background and credit investigation of myself, as a prospective owner in the Association and therefore authorize criminal histories of myself to be searched for the purpose of determining my suitability for residence in the community. I understand that the results of such investigation will be shared by the property manager with the Association’s Board of Directors.

Dated: _____

_____ Date of Birth _____

(Print name)

_____ Social Security No. _____

(Signature)

Driver’s License No. _____ State of Issuance _____

_____ Date of Birth _____

(Print name)

_____ Social Security No. _____

(Signature)

Driver’s License No. _____ State of Issuance _____

Must be signed by all applicants. Use additional copy of this sheet if needed for additional applicants.

PLEASE ATTACH A CLEAR COPY OF A CURRENT PHOTO ID FOR ALL APPLICANTS
