

**Application for Board Approval of Unit Purchase/Transfer THE PLACE  
450, A CONDOMINIUM ASSOCIATION, INC. (A Florida Not-for-Profit  
Corporation)**

**Unit Number:** \_\_\_\_\_ **Address:** 450 Beach Road, Sarasota, FL

**Proposed Purchaser/Applicant Name(s):** \_\_\_\_\_

**Date of Application:** \_\_\_\_\_ **Anticipated Closing Date:** \_\_\_\_\_

This application is required under **Section 14 of the Declaration of Condominium** of The Place 450, A Condominium. The Board of Directors (or its authorized committee/agent) must approve **all** sales/transfers **in writing** before they are valid. Approval is based on good moral character, social compatibility, **and financial responsibility** (as expressly stated in the Declaration).

The Board will review this application promptly. If not approved or acted upon within 15 days, additional notice and right-of-first-refusal rules apply per the Declaration.

**Required Submissions:**

- Fully completed and signed application.
- Signed copy of the current Assessment Statement, Bylaws, Declaration, and Rules & Regulations. (acknowledgment below).
- Copy of fully executed Purchase and Sale Agreement.

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**APPLICANT INFORMATION:**

1. Full Legal Name: \_\_\_\_\_
2. Phone: \_\_\_\_\_ Email: \_\_\_\_\_
3. Current Address: \_\_\_\_\_ City/State/ZIP: \_\_\_\_\_
4. Co-Applicant/Spouse (if applicable): \_\_\_\_\_
5. **HOA:**
  - Have you previously resided or owned in a condominium, cooperative, apartment complex or deed restricted community? Yes: \_\_\_\_\_ No: \_\_\_\_\_
  - Do you have any outstanding judgments or HOA/condo delinquencies? Yes: \_\_\_\_\_ No: \_\_\_\_\_ (If yes, explain): \_\_\_\_\_
  - Will the condominium be used as your primary residence? Yes \_\_\_\_\_ No \_\_\_\_\_

- Will the condominium be used as an investment or rental property?  
Yes\_\_\_\_ No\_\_\_\_
- Have you previously resided in a condominium or similar community that permitted short-term rentals (e.g. Airbnb, VRBO)? Yes\_\_\_\_  
No\_\_\_\_

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## **ACKNOWLEDGEMENTS, REPRESENTATIONS & AGREEMENT**

By signing below:

- 1. I/We acknowledge receipt of the Association’s current assessment statement for the unit, which reflects assessments due at this time and for the remainder of the fiscal year. I/We agree to pay all assessments and chargers promptly as they become due and acknowledge the Association’s lien rights under Florida law and the Declaration of Condominium.**
- 2. I/We have received, read, and agree to abide by the Declaration of Condominium, Bylaws, Articles of Incorporation, Rules & Regulations, and all amendments.**

**Applicant Signature(s):**

Signature\_\_\_\_\_ (Print Name) \_\_\_\_\_ Date\_\_\_\_\_

Signature\_\_\_\_\_ (Print Name) \_\_\_\_\_ Date\_\_\_\_\_