Countryside Estates R.O. Association Inc

Consumer Authorization and Release

For Tenants and Owners

Applicant:	Middle:	Last:
e-mail address		Memorital III Al e o tala hadrinarian laurentalian des de la del la desta de la del la
Social Security #:	~~~	
Date of birth:		
Current address:		
City:	State:	Zin:
How long at this address?		
Co-applicant Name:	Middle:	Last:
Social Security #:	e-mail address	define and a may a supplement of the 4.12
Date of birth:		
Current address:		
City:		
How long at this address?		
A minimum credit score of 680 (US) or 725(score as it is a "hard inquiry".		

I / We hereby authorize Countryside Estates R.O. Association Inc. to obtain my/our consumer report / credit information, credit risk score and other enhancements to my/our consumer report from one or more of the three national credit reporting repositories (Equifax, Experian, Trans-Union) and provide a copy of the Report to:

Countryside Estates R.O. Association Inc., for the purpose of assessing my/our Application for Membership or Tenancy in said Association. I /We understand that 'other enhancements' includes conducting a national criminal background check, to which I/We give my/our consent.

I/ We further authorize the Countryside Estates R.O. Association Inc. to contact references listed on my/our application in order to assess my /our Application for Membership or Tenancy in said Association.

I/ We further authorize the Countryside Estates R.O. Association Inc. to verify past and present landlord references in order to assess my/our Application for Membership or Future Tenancy in said Association.

It is understood that a photocopy and/or facsimile of this document shall also serve as an authorization to provide information requested.

The information obtained is only to be used in the processing of my/our Membership or Tenancy Application.

Applicant:	Date:
Co-Applicant:	Date:

COUNTRYSIDE ESTATE MOBILE HOME PARK

SALES AGREEMENT

SELLER:	**A****		,husband & wife,	single
BUYER:	ADDDECC, 27	466 TIC II: -1 10 NI	husband & wife, Lot, Clearwater, FL 33761	single
TROFERTI	Lot	400 OS Highway 19 N. Countryside Est	ates Mobile Home Park	
	201	, Country side Est	ates widdie frome raik	
PRICE:	\$	Deposit \$	Balance Due \$	
	ME DESCRIP	TION: Identification #		
INCLUDED	PERSONAL P	ROPERTY:		dhahan da san a san
CLOSING C	OSTS: () s	eller pays () Buye	er pays () Split/Explain (50/5	50??)
FINANCING	G: () N/A	() Lender - Na	me of Lender and contact info	
CLOSING D	ATE:			
SPECIAL CO	ONDITIONS O	R REQUIREMENTS:		
COMMISSIC	ONS: () Ag	ent		
MONTHLY	MAINTENAN	CE OR ASSOCIATION	N CHARGES: \$/per	
TRANSFER		Attn: Judy D'Amic Phone: (727) 733-7	d, Suite B, Dunedin, FL 34698	onlaw.com
SELLER SIG	NATURES:		BUYER SIGNATURES:	
X			Х	
Print Name _		Date	Print Name	Date
X			X	
Print Name _		Date	Print Name	Date
Your Address	s:		Your Address:	

WILLIAM J. KIMPTON P. A. 605 Palm Blvd. Ste. B Dunedin, FL 34698

Phone 727-733-7500 Fax 727-733-7511 Tim@kimptonlaw.com judy@kimptonlaw.com

BUYER INFORMATION SHEET

Male Female	Married	Single	Husband a	and Wife
Buyer Address City	State	Zip	Rent	Own
Work#	Home#	Cell#		
Email Address			-	
Moving In?yes	No Here f	or closing?	or a M	ail Away?
DO YOU WANT THE CO-BUYER NAME:		NY NAME?)		
as it is to appear on t	he Deed, i.e. with Ir	itials, if appli	cable)	
Male Female	Married_	Sin	ngle	
Darron Addmaga				
Buyer Address				
Home#	Work#	(Cell#	
Home#	Work#	(Zip	Cell# Rent	Own
Home# City	Work# State	Zip	Cell#Rent	_Own
Buyer Address Home# City Email Address Address after closing: Property Address? Other address:	Work#State s (to appear on the I(will be prima	Zip	Rent ty to send tax)	
Home#CityEmail AddressAddress after closing: Property Address? Other address: Buyer's Realtor's Office	Work#States (to appear on the I(will be prima	Zip	Rent ty to send tax)	
Home# City Email Address Address after closing: Property Address? Other address: Buyer's Realtor's Office Your Agent	Work#State s (to appear on the I(will be primate	ZipZip	Rent ty to send tax)	x bill)
Home# City Email Address Address after closing: Property Address? Other address:	Work#States (to appear on the I(will be primate	Zip	Rent ty to send tax)	x bill)

IF YOU HAVE ANY QUESTIONS ON THIS FORM, PLEASE CALL US.

WILLIAM J. KIMPTON P.A. 605 PALM BLVD. STE. B DUNEDIN, FL 34698 Phone: 727-733-7500 Fax: 727-73-7511 Judy@kimptonlaw.com Tim@kimptonlaw.com

SELLER INFORMATION SHEET

SELLER NAME		Ma	rried	Single
				Single
Husband and Wife?				
Address after closing				
City	State	Zip		
Work#	Home#	C	ell#	
Email Address				
UNITED STATES CITIZ	ZEN?yes	no		
Here for Closing:	Or a Mail Aw	ay?		
Mortgage on Property				
a. Lender				
b. Account #				
b. Account # c. Social Security #		(Only call o	r Fax)	
HOA or Condo Assoc Na				
Additional HOA Info				
a. Management Company	<i></i>			
b. Contact Number				
c. Dues				
d. Assessments				
Sellers Realtor Company				
a. Seller's Agent				
b. Phone#		ema	il	
c. Commission				

IMPORTANT ITEMS TO HAVE AT CLOSING

- 1. Original Title(s) to the mobile home. (They are usually blue in color) They will need to be signed in order to give the buyer at closing.
- 2. Original Share Certificate to turn in so the a new one can be made for the Buyer.