

The Intercoastal Condominium Association, Inc.  
A Deed Restricted Community

## Application for Sale

**Note: Application must be submitted 14 days prior to occupancy for Board approval**

**Please include a copy of the proposed contract**

**A background check is required of all applicants.**

**\$150.00 APPLICATION FEE**

**PLEASE PRINT CLEARLY**

Property to be Purchased: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

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

Owner's Email Address: \_\_\_\_\_

Owner's Home Tele #: \_\_\_\_\_ Cell/Work Tele: \_\_\_\_\_

**Personal Data of Purchaser: Names:**

(1) \_\_\_\_\_ Phone Contact No. \_\_\_\_\_

(2) \_\_\_\_\_ Phone Contact No. \_\_\_\_\_

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

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

Home Telephone: \_\_\_\_\_ Cell/Work: \_\_\_\_\_

Employment: NAME AND ADDRESS: \_\_\_\_\_

**Other Adults To Live in Unit:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Age: \_\_\_\_\_

**Children To Live in Unit:**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

**Pet Information:**

Type of Animal: \_\_\_\_\_

Breed: \_\_\_\_\_

Weight: \_\_\_\_\_

Type of Animal: \_\_\_\_\_

Breed: \_\_\_\_\_

Weight: \_\_\_\_\_

**Vehicle Information:**

Tag # \_\_\_\_\_ Make/Model \_\_\_\_\_ Year: \_\_\_\_\_

Tag # \_\_\_\_\_ Make/Model \_\_\_\_\_ Year: \_\_\_\_\_

*There are only two parking spaces per unit.*

**Documents and Agreement** (A background check is required of all applicants)

I have received \_\_\_ have not \_\_\_ received a copy of the Rules and Regulations of the community.

Applicant Signature \_\_\_\_\_

Applicant Signature \_\_\_\_\_

Completed Applications for Board Approval should be Sent to:

Kim Paulsen, LCAM  
Ameri-Tech Property Management, Inc.  
24701 U.S. Highway 19 North, Suite 102  
Clearwater, FL 33763  
[kpaulsen@ameritechmail.com](mailto:kpaulsen@ameritechmail.com)

Telephone: (727) 726-8000 x401

FAX: (727) 723-1101

Name and Address of Homeowner or Real Estate Agent to whom Approved Application is to be Mailed:

Homeowner/Agent: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Application Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Kim Paulsen, LCAM, Acting as Agent for The Intercoastal Condominium Association