

Riverbend Homeowners Association of Lee County, Inc. c/o Premier CAM Services, LLC

APPLICATION FOR OCCUPANCY PLEASE PRINT

Before submitting your Sales Application for processing, we require the following:

- 1) Completed Application (One application per unmarried adult) All fields completed
- 2) Non-refundable Application Fee - \$100.00 per application, checks made payable to:
Premier CAM Services, LLC
- 3) Signed Copy of Sales Contract and HOA rider

Please Note: Applications are not processed until all above documentation is received

All documentation MUST be submitted 20 days prior to Sales Closing. Any application(s) submitted less than 20 days prior to the closing are at risk of having their closing date delayed.

Please mail Completed Application(s), Application Fee(s), and Signed Contract to:

Premier CAM Services
PO Box 152047
Cape Coral, FL 33915

If you have any questions, please call our office: 239-217-6599 or email: admin@premiercams.net
You may drop off your application or express mail to Premier CAM Services office located at:
3436 Marinatown Lane, Suite 3, North Fort Myers, FL 33903
We are open Monday through Friday 9:00am to 4:00pm.
You may use our night drop box for after hours.

Today's Date _____ Address/Unit _____

Date of closing _____

Purchaser Information: Number of people to occupy Home/Unit _____

Name _____

Contact Phone # _____ E-mail _____

Spouse _____

Spouse Phone # _____ E-mail _____

Check box if you authorize your email(s) to be included in a Homeowner Directory

I Authorize

_____ Initials

Other Occupant (s)

Name _____ Relationship _____ Age _____

Name _____ Relationship _____ Age _____

Name _____ Relationship _____ Age _____

Indicate use: Permanent Residence _____ Rental _____

Seasonal Residence _____ Other (Specify) _____

Name of Current Owner _____

Name of Realtor (If Any) _____

Name of Closing/Leasing Agent _____

Agent Contact Info _____

In Case of Emergency Notify:

1. Name _____ Address _____ Phone _____

2. Name _____ Address _____ Phone _____

Your Address After Closing: **IMPORTANT FOR MAILINGS-PLEASE COMPLETE**

Residence History (At Least 5 Years)

Present Street Address _____

City, State, Zip _____ Phone _____

Current Landlords Name _____

Address _____

Landlords Phone _____ Dates of Residency: From _____ to _____

Prior Residency Address _____

City, State, Zip _____

Prior Landlords Name / Address _____

Landlords Phone _____ Dates of Residency: From _____ to _____

Have you previously lived in a Condominium Association? YES _____ NO _____

Have you served on a Condominium Association Board of Directors? YES _____ NO _____

Personal Information

Do you have a pet? Yes _____ No _____

Type of Pet (s) _____

Weight of Pet (s) _____

Vehicle #1 Make/Model _____ Color _____

Vehicle #2 Make/Model _____ Color _____

License Plate Number(s) #1 _____ State ____ #2 _____ State ____

The Managers and Members of the Board of Directors are available to answer any questions regarding the Governing Documents and Rules & Regulations that govern the Association. If you have any questions, please contact us prior to signing this application for occupancy.

I/We have received, read and understand the Governing Documents and Rules & Regulations for Riverbend Homeowners Association of Lee County, Inc. I/We agree to abide by all of the provisions and those of other recorded documents as well as all of the rules and regulations made pursuant thereto.

I/We certify that all of the above furnished information is true and accurate, should there be any discrepancies and/or false information provided, I understand that this application is null and void.

As required by law, this information is kept strictly confidential.

Applicant Signature: _____

Applicant Signature: _____