



**Oak Chase Homeowners Association**  
**C/o Elliott Merrill Community Management**  
**835 20<sup>th</sup> Place, Vero Beach, FL 32960**  
**Ph: (772) 569-9853; Fax: (772) 569-4300**  
[www.elliottmerrill.com](http://www.elliottmerrill.com)

**SALES INFORMATION NOTIFICATION**

Lot # \_\_\_\_\_

Street Address: \_\_\_\_\_

Current Owners name: \_\_\_\_\_

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

Prospective Buyers (applicant) Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

City, State, and Zip: \_\_\_\_\_

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

I/we represent that the information contained herein is factual and true. I/we agree that you may make further inquiries concerning this information, particularly of the references given.

Initials: \_\_\_\_\_

I/we have received and read the Articles, Bylaws and Covenants and the rules and regulations of **Oak Chase Homeowners Association**, Inc. and agree to abide by them at all times, whether the unit is occupied by myself, members of my family or leased to any third party.

Initials: \_\_\_\_\_

I/we fully understand that Owners are responsible for the behavior of their tenants, guests and visitors of tenants. Owners must review with tenants, and tenants must comply with the Declaration of Protective Covenants and Restrictions and the Rules and Regulations of Oak Chase. These documents must be included in any lease agreement.

Initials: \_\_\_\_\_



Please state the name and relationship of all persons, in addition to the owners, who will occupy the residence.

Name	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Pets: (Y or N) \_\_\_\_\_ Dog \_\_\_\_\_ Cat (Limit four)

\* Please note pet restrictions in the Declaration of Protective Covenants and Restrictions, Article VIII, Section 8.12.

<u>Breed</u>	<u>Weight</u>	<u>Age</u>	<u>Name</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Applicant's automobile(s) to be parked on premises must comply with the Declaration of Protective Covenants and Restrictions, as outlined in Article VIII, Section 8.17.

Car 1: Make \_\_\_\_\_ Year \_\_\_\_\_ Model \_\_\_\_\_

Color \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_

Car 2: Make \_\_\_\_\_ Year \_\_\_\_\_ Model \_\_\_\_\_

Color \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_

Car 3: Make \_\_\_\_\_ Year \_\_\_\_\_ Model \_\_\_\_\_

Color \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_



I/we will provide a copy of the recorded deed to the Association within 10 work days of the date of closing.

Initials: \_\_\_\_\_

Date \_\_\_\_\_

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

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

The closing agent for this purchase is: \_\_\_\_\_

Agency Name and Address: \_\_\_\_\_

\_\_\_\_\_

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