

**SEAWARD AT ATLANTIC VIEW CONDOMINIUM
ASSOCIATION, INC.**

Limited Common Element Transfer Form

TRANSFEROR (CURRENT OWNER):

NAME(S) _____ UNIT # _____

TRANSFeree (NEW OWNER):

NAMES(S) _____ UNIT # _____

LIMITED COMMON ELEMENT TO BE TRANSFERRED

Under Building Parking Space Number _____
Covered Parking Space Number _____
Storage Locker Number _____
Beach Locker Number _____
Garage _____

ROSTER RECORD

I (We) hereby transfer the above reference limited common element(s) to the unit owner(s) named above and request the Association to revise their official roster accordingly in accordance with the provisions of Section 3.3(f) of the Declaration.

SIGNATURE(S) OF TRANSFEROR

Date: _____

Witness:

SIGNATURE(S) OF TRANSFeree

Date: _____

Witness:

RECORDED ON THE ROSTER OF LIMITED COMMON ELEMENTS

Seaward at Atlantic View Condominium Association, Inc.

Signature

Title

Date

(Submit form in triplicate)