

**BIRCHWOOD CONDOMINIUMS I & II ASSOCIATION
HARBORVIEW ROAD
PORT CHARLOTTE, FLORIDA 33980
CONDOMINIUM OCCUPANT APPLICATION**

All Unit Sales must be approved by the Birchwood Condominiums I & II Association (HOA) Board

- A Non-refundable One Hundred Fifty Dollar (\$150) application fee per adult unless a married couple must accompany application.
- A photocopy of Occupant(s) Photo ID.
- Background check for leases provided by the owner and/or leasing agent.
- Sales Applications must include:
 - Attach first page of the Sales Agreement
 - Must include Seller(s) and Buyer(s) full names and current addresses.
 - Verification of SSN (Social Security Number) and DOB (Date of Birth).
 - Proof of Homeowner Insurance within 30 days.

Occupancy Type (Circle one): Primary Residence / 2nd Residence/Snowbird / Rental/Renter

OCCUPANT #1

NAME: _____

DOB: _____ **SSN:** _____

PRESENT ADDRESS: _____

City/State/Zip Code: _____ **Lenth of Time** _____

If less than 2 years, prior address: _____

TELEPHONE#: Home: _____ Cell: _____ Work: _____

EMAIL ADDRESS: _____

Vehicle Make: _____ **Model:** _____

Color: _____ **State:** _____ **Plate:** _____

OCCUPANT #2

NAME: _____

DOB: _____ **SSN:** _____

PRESENT ADDRESS: _____

City/State/Zip Code: _____ **Lenth of Time** _____

If less than 2 years, prior address: _____

TELEPHONE#: Home: _____ Cell: _____ Work: _____

EMAIL ADDRESS: _____

Vehicle Make: _____ **Model:** _____

Color: _____ **State:** _____ **Plate:** _____

I (we) have received a copy of the Birchwood Condominiums I & II Rules & Regulations and a copy of the Birchwood Condominiums I & II Association Bi-Laws, read, understand, and agree to abide by these established by the Condo Owner Association Board.

Signature: _____ **Date:** _____

Signature: _____ **Date:** _____

5/7/24