

# LELY COUNTRY CLUB

c/o - Resort Management  
2685 Horseshoe Dr S, #215  
Naples, FL 34104

Phone: (239) 659-5526 Fax (239) 403-1061



## HOMEOWNER SALES APPLICATION FORM

*Please Print or Type*

Current Owner of Record : \_\_\_\_\_

[ ] I (We) hereby notify the intent to **purchase Address:** \_\_\_\_\_

Closing Agent: \_\_\_\_\_ Email: \_\_\_\_\_

Phone #: \_\_\_\_\_ Closing Date: \_\_\_\_\_

- **Please include a copy of the EXECUTED sales contract with this form**
- **\$100 transfer fee (non-refundable) – check made payable to: Lely Country Club**
- **Fully completed Sales Application Form**

### PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION:

Purchaser's Name: \_\_\_\_\_

Marital Status: \_\_\_\_\_ If married, spouses name: \_\_\_\_\_

Purchaser's Present Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone: \_\_\_\_\_

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

Please state the name, relationship, and age of all other persons who will be occupying the property regularly.

NAMES	RELATIONSHIP	AGE
_____	_____	_____
_____	_____	_____

I am purchasing this property with the intent to (check all that apply)

- Reside here on a full-time basis       Reside in the unit part-time       Lease unit

\_\_\_\_\_ **Purchasers Initials** - I am aware of and agree to abide by the Lely Country Club Documents, Articles of Incorporation, Bylaws and all other regulations in effect as may be amended, as an owner/resident. I acknowledge receipt of a copy of the Association rules.

SIGNATURE OF PURCHASER \_\_\_\_\_ DATE \_\_\_\_\_

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