



## **Owner's Intent to Sell Notification Form**

*This form must be completed and submitted to the Board of Directors and Management prior to listing or transferring ownership of your property.*

### **OWNER INFORMATION**

- **Owner(s) Name:** \_\_\_\_\_
  - **Property Address:** \_\_\_\_\_
  - **Lot #:** \_\_\_\_\_
  - **Phone Number:** \_\_\_\_\_
  - **Email Address:** \_\_\_\_\_
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### **SALE INFORMATION**

- **Listing Agent (if applicable):** \_\_\_\_\_
  - **Real Estate Company:** \_\_\_\_\_
  - **Agent Contact Phone/Email:** \_\_\_\_\_
  - **Expected Listing Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_
  - **Expected Closing Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_
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### **BUYER INFORMATION (if known at time of submission)**

- **Buyer Name(s):** \_\_\_\_\_
  - **Buyer Email Address:** \_\_\_\_\_
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### **REQUIRED ACTIONS & DISCLOSURES**

Please acknowledge the following by checking each box:

- I understand that per the governing documents, the Association requires written notice of an intent to sell.
- I understand that the buyer will be required to submit an application for approval, as applicable.

- I acknowledge that I must remain compliant with HOA rules and responsibilities until the closing date.
  - I acknowledge that my dues must be paid to date until the closing date.
  - I agree to notify the management office upon confirmation of a sale and provide a copy of the final settlement statement or closing disclosure.
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**SIGNATURE**

By signing below, I affirm the above information is accurate and that I will comply with the Association's rules and requirements related to the sale of my property.

**Owner Signature:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Co-Owner Signature:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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**Please return this completed form to:**

Raffia Preserve Master Association Board & Management

APhillips@apmsfl.com | 4191 Raffia Palm Circle, Naples, FL 34119 | 239-353-2225