

FAIRVIEW PROPERTY OWNERS' ASSOCIATION, INC.

PURCHASE OR LEASE INFORMATION REQUIREMENT FORM

ALL REQUIRED DOCUMENTS SHOULD BE PRESENTED 10 DAYS PRIOR TO CLOSING FOR PROCESSING

SALE CLOSING DATE _____ LEASE START DATE _____

Name of Seller/Lessor: _____

Address of Home Sold/Leased: _____

Name of Purchaser/Lessee: _____

I have received a copy of the Declaration for Fairview Property Owners Association, and I understand that purchasing a home in Fairview POA requires all occupants and guests to abide by all the restrictions, and any Rules and Regulations of the community including the requirement that at least one person residing in the home must be 55 years of age or older (no person under the age of 18 may reside in the home).

_____ I understand that Proof of Age of required, copy of Photo ID is attached.

_____ I understand that a copy of Lease Agreement is required, and attached.

Purchaser/Lessee _____

Purchaser/Lessee _____

Information will be provided to the Seller/Agent and Title Company (if any), at cost.

Name of Broker: _____ Phone: _____

Title Company: _____ Phone: _____

Date Required Information was received by Board: _____

The Fairview Property Owners Association hereby confirms information compliance requirement this _____ Day Of _____, _____.

By: _____ Title: _____

If you have questions or concerns, please contact Kathy - Kathy@CFirstAM.com

