



**RIVERWIND HOMEOWNERS  
ASSOCIATION**  
C/o Elliott Merrill Community Management  
835 20<sup>th</sup> Place  
Vero Beach, FL 32960  
(772) 569-9853 Fax: (772) 569-4300

### SALES INFORMATION NOTIFICATION

Lot # \_\_\_\_\_

Street Address: \_\_\_\_\_

Current Owners name: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Prospective Buyers (applicant) Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

City, State, and Zip: \_\_\_\_\_

Telephone number: \_\_\_\_\_

I/we represent that the information contained herein is factual and true. I/we agree that you may make further inquiries concerning this information, particularly of the references given.

Initials: \_\_\_\_\_

I/we have received and read the Articles, Bylaws and Covenants and the rules and regulations of **Riverwind Homeowners Association, Inc.** and agree to abide by them at all times, whether the unit is occupied by myself, members of my family or leased to any third party.

Initials: \_\_\_\_\_

I/we fully understand that amendment 9 of the Covenant and Restrictions places specific requirements/restrictions on leasing of residences. Additionally, I/we fully understand no sub-leasing is permitted. We have reviewed and accept these restrictions. I/we understand that the residence cannot be leased without having first received permission from the Board of Directors after proper application has been made. The Board may take up to 30 days to approve all leases. No prospective lessee may move in before approval is received from the Board of Directors.

Initials: \_\_\_\_\_

The restrictions of **Riverwind Homeowners Association** provide that the units are for single-family residency only. Please state the name and relationship of all persons, in addition to the owners, who will occupy the residence.

Name	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Pets: (Y or N) \_\_\_\_\_ Dog \_\_\_\_\_ Cat (Limit three)

Please note pet restrictions in Declaration and Covenants Article 9/Section 4.

<u>Breed</u>	<u>Weight</u>	<u>Age</u>	<u>Name</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Applicant's automobile(s) to be parked on premises must comply with Covenants and Restrictions, as outlined in Amendment 9/paragraph 5. Commercial and recreational vehicles, or trucks exceeding one-ton capacity, as further described in the above referenced amendment, are prohibited.

Car 1: Make \_\_\_\_\_ Year \_\_\_\_\_ Model \_\_\_\_\_  
Color \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_

Car 2: Make \_\_\_\_\_ Year \_\_\_\_\_ Model \_\_\_\_\_  
Color \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_

Car 3: Make \_\_\_\_\_ Year \_\_\_\_\_ Model \_\_\_\_\_  
Color \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_

I/we will provide a copy of the recorded deed to the Association within 10 work days of the date of closing.

Initials: \_\_\_\_\_

I/we understand there is a **capital project contribution payment** (equal to one-quarter's assessment) that is payable to **Riverwind Homeowners Association**.  
(Select one) \_\_\_\_\_ The check will be attached with this application when sent to the management company of Riverwind prior to the closing of the sale, or \_\_\_\_\_ collected at closing.

Date \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

The closing agent for this purchase is: \_\_\_\_\_

Agency Name and Address: \_\_\_\_\_

\_\_\_\_\_

Telephone #: \_\_\_\_\_