

CARRARA AT TALIS PARK CONDOMINIUM OWNERS' ASSOCIATION, Inc.

c/o – PMI Gulf Coast 1004 Collier Center Way, Suite 105 Naples, FL 34110

Phone: 239-593-6246 Email: management@naplesservicegroup.com

PURCHASE INFORMATION FORM - SALES OR TRANSFER

(MUST BE SUBMITTED 20 DAYS PRIOR TO CLOSING)
Please Print or Type

Current Owner of Record:			
/ We do hereby notify the intent to			
Γitle Company/ Closing Agent:		Phone:	
Closing Date:	Date o	Date of Occupancy:	
• \$150 trans	ude a copy of the EXECUT) fer fee (non-refundable) – cl leted Purchase Information	heck made payable to	n this form : Carrara at Talis Park COA, Inc.
PLEASE TYPE OR PRINT THE	FOLLOWING INFOR	MATION:	
Purchaser's Name:			
Spouse or co-applicant:			
Purchaser's Present Address:			
City	State Zip	Phone:	
Email Address:			
Please state the name, relation	nship, and age of all other	persons who will be	occupying the unit with applicant.
NAMES	RELATIONSHI	P	AGE
			-
			_
I am purchasing this property with the	intent to (check all that apply	<i>(</i>)	
Reside here on a full-time bas	sis Reside in the	unit part-time	Lease unit