

SEA COLONY COMMUNITY AND CONDOMINIUM ASSOCIATION, INC.
1910 Mainsail Circle
Jupiter, FL 33477
Tel: 561-743-5411 Fax: 561-743-5247
Email: KPalazzo@campbellproperty.com

***NOTICE: Due to the Covid-19 pandemic, Community recreation facilities may be closed at times when necessary for the health and safety of our residents. All applicants must acknowledge they have read the above and understand the recreation facilities may be closed during the term of their lease.**

Applicant Name: _____

Sea Colony Unit #: _____

Signature: _____

Date: _____

Instructions for Purchase Application Package

1. Print and complete this Purchase Application Package in its entirety.
2. A fully executed copy of the sales contract must accompany this completed package.
3. After closing a copy of the recorded deed MUST be provided to Sea Colony Community & Condominium Association, Inc. via email to the Property Manager, Linda Francis, at KPalazzo@campbellproperty.com AND to the A/R Department of Campbell Property Management at ARjupiter@campbellproperty.com by the closing agent, i.e. Title Company or attorney.
4. The Purchase Application Package, including all information and documents requested therein must be completed, executed and submitted to the Association, at the address above *at least* thirty (30) days prior to the expected date of occupancy. A purchase *is not* effective nor may the respective buyer(s) occupy the unit without the prior written approval by the Board of Directors of the Association.
5. A "Certificate of Approval" will be issued upon approval.

Thank You,

The Management
Sea Colony Community Association, Inc.
Sea Colony Condominium Association, Inc.

Sea Colony Community and Condominium Associations
Purchase Application Package

Anticipated Closing Date: _____

Property Address

LH or Condo

Applicant Purchaser

Name of Co-Applicant Purchaser

Please list name(s) of children and ages

Present address and how long at present address / Rent or Own

Present Phone Number(s)

Email Address(s)

Alternate Mailing Address (if applicable)

Will anyone other than spouse and children named above reside with you? ___ YES ___ NO

Do you have pets? ___ YES ___ NO

If "yes", provide number of pets, type, weight and breed: _____

VEHICLE INFORMATION:

***PLEASE SEE RULES REGARDING PARKING!**

Vehicle #1:

(please list vehicles that will be on the property and include year / make / model / color / State / tag #)

Vehicle #2:

(please list vehicles that will be on the property and include year / make / model / color / State / tag #)

Do you have a motorcycle? _____

Current Property Owner Name

Current Property Owner Phone Number

Name of Agent handling sale

Agent Phone Number & Email Address

Contact in case of Emergency

Phone Number

Relationship

Applicant's Signature

Date

Co-Applicant's Signature

Date

SEA COLONY COMMUNITY ASSOCIATION, INC. and
SEA COLONY CONDOMINIUM ASSOCIATION, INC.

ACKNOWLEDGMENT

I hereby acknowledge that I have received, read and agree to abide by the Use Restrictions of the Community and (where applicable) the Condominium Associations. I also understand that I am personally responsible for my actions and those of my guests, tenants or invitees. Any damages or injunctive relief for failure to comply with these provisions may be brought against the owner.

I understand that I am subject to the Declaration of Sea Colony Community Association, Inc. and (where applicable) the Declaration of Sea Colony Condominium Association, Inc.

Failure to comply with any provisions of the Declarations, By-Laws or Use Restrictions of the Association(s) may result in a fine of up to \$100.00 per violation, per occurrence, as outlined in Florida Statutes 617, 718 and 720.

Purchaser _____ Date _____

Co-Purchaser _____ Date _____

**SEA COLONY COMMUNITY ASSOCIATION, INC. and
SEA COLONY CONDOMINIUM ASSOCIATION, INC.**

E-MAIL COMMUNICATION & CONSENT FORM

The undersigned Member of Sea Colony Condominium and/or Sea Colony Community Association, Inc. hereby consents to receiving notices, including but not limited to, notices of all Annual and Special Members' Meetings and notice of any Board Meeting, Electronic Voting Information and Ballots and any other notices where written notice to members is required, by electronic transmission to the email address listed below **in lieu of written or mailed notice.**

PLEASE PRINT CLEARLY.

Owner #1 Name (Last, First): _____

Owner #2 Name (Last, First): _____

Sea Colony Address: _____

Owner #1 Phone: _____ Cell: _____

Owner #2 Phone: _____ Cell: _____

PLEASE ADD MY E-MAIL ADDRESS TO THE ASSOCIATION'S DATABASE:

PRIMARY e-mail address: _____

Secondary e-mail address: _____

Signature of Homeowner **AUTHORIZING** the use of the **PRIMARY** e-mail address provided above to receive Sea Colony NOTICES, ELECTRONIC VOTING INFORMATION & BALLOTS and EMAIL BLASTS.

Signature _____ Date _____

MAIL, E-MAIL OR FAX COMPLETED FORM TO:
Sea Colony Community and Condominium Association, Inc.
1910 Mainsail Circle
Jupiter, Florida 33477
KPalazzo@campbellproperty.com
Fax: (561) 743-5247

Sea Colony Community and Condominium Associations

OWNER INFORMATION

**This information will be provided to the Guardhouse 561-575-7270*

Unit Address _____ LH or Condo (circle one)

Owner #1 Name _____

Owner #1 Cell Phone _____ Other _____

Owner #2 Name _____

Owner #2 Cell Phone _____ Other _____

Emergency Contact _____

Cell Phone _____ Other _____

Permanent Guest List:

*This means that you will NOT get a call from security when your permanent guest is at the gate. **Please note:** All Guests must produce photo I.D. upon arrival at the gate regardless of whether or not they are on the permanent guest list below.*

1. _____ 2. _____

3. _____ 4. _____

Announcing Visitors & Guests:

To announce a visitor or guest, please contact the Guardhouse at 561-575-7270. This would include family, friends, deliveries, caretakers, etc. Once called in the Guard on duty will not need to contact you to announce that they have arrived, unless you request otherwise. Should a visitor or guest arrive without having been called in, the Guard will attempt to contact the owner to obtain authorization to allow the visitor or guest access to the community. Please note, if you are not reachable the Guard will need to turn your visitor or guest away.

Signature _____ Date _____

Sea Colony Community and Condominium Associations

HOMEOWNER DIRECTORY

In order for Sea Colony to publish your information in the Directory available on the Sea Colony website, we must obtain your authorization. If you would like to be listed in the Directory please complete the information below and return it to the Management Office. The information you provide below will be included when the Homeowner Directory is updated.

Only the information that you provide below will be included.

Owner #1 Name _____

Owner #2 Name _____

Sea Colony Address _____

Alternate Address _____

Owner #1 Phone # _____ Cell# _____

Owner #2 Phone # _____ Cell# _____

Additional Phone # _____

Owner #1 Email Address _____

Owner #2 Email Address _____

Additional Email Address _____

Signature (REQUIRED)

Date

Please return this completed, signed form to the Sea Colony Management Office in person, by mail to 1910 Mainsail Circle, Jupiter, FL 33477, by email to KPalazzo@campbellproperty.com or fax to 561-743-5247.