



# Tamarind Gulf & Bay Condominium Association, Inc

All Applications: c/o Sunstate Association Management, Inc.  
P.O. Box 18809, Sarasota, FL 34276  
Office (941) 870-4920 Fax (941) 870-9652  
Email: [allapplications@sunstatemanagement.com](mailto:allapplications@sunstatemanagement.com)

## Sales Application

Return this application to Sunstate Association Management Group, Inc., PO Box 18809 Sarasota, FL. 34276. Must include a copy of Driver's License for all residents over 18 years of age and a Non-Refundable Application fee of \$150.00 made payable to Tamarind Gulf & Bay Condominium Association, Inc.

Present Owner: \_\_\_\_\_  
Title Co: \_\_\_\_\_  
Unit Address: \_\_\_\_\_  
*Anticipated Closing /* \_\_\_\_\_

Full-Time Residence? YES  NO  Realtor / Name and Phone: \_\_\_\_\_

### Applicant Information

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
*Last First M.I.*  
Phone: \_\_\_\_\_ Email \_\_\_\_\_  
Driver License #: \_\_\_\_\_ Employer: \_\_\_\_\_

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
*Last First M.I.*  
Phone: \_\_\_\_\_ Email \_\_\_\_\_  
Driver License #: \_\_\_\_\_ Employer: \_\_\_\_\_

Present Address: \_\_\_\_\_  
*Street Address City, State, Zip*

Previous Address: \_\_\_\_\_  
*Street Address City, State, Zip*

Other Occupants: \_\_\_\_\_  
Names & Ages \_\_\_\_\_

Pet(s): Breed Weight  
1 \_\_\_\_\_  
2 \_\_\_\_\_

Vehicle 1: \_\_\_\_\_  
*Make Model State License Plate #*

Vehicle 2: \_\_\_\_\_  
*Make Model State License Plate #*

List any additional vehicles on a separate sheet.



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## Disclaimer and Signature

The undersigned has received a copy of the Association Documents: By-Laws and the Rules and Regulations of Tamarind Gulf & Bay Condominium Association, Inc and agree to abide by them.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Action By Board of Directors

Application Approved    YES    NO  
                                     

Board  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_