

**Cypress Bend RV Resort Condominium Association**

20224 Orange Tree Lane, Estero, FL 33928

Phone: (239)992-7555, Fax (239)992-7503 email: cypressbendrvesterofl@gmail.com

**APPLICATION FOR MEMBERSHIP**

**Consent to Transfer**

Lot #	RV Size	Unit #	CB Street Address	Estimated Closing Date
Closing Agent:			Agent's Phone Number:	
Agent's Address:				

**NEW OWNER INFORMATION**

New Owner's Name(s) _____		Are you over 55? Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
		Are you over 55? Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
<b>Proof of age &amp; Photo ID must be attached to this Application (i.e., Driver's license, Birth Certificate, etc</b>					
Do you have any ownership in other properties in the park?		Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
		If yes, How Many?			
Mailing Address:					
City:			State:	Zip:	
Home Phone:		Cell Phone:		Email:	
Planned use of property:	Seasonal	<input type="checkbox"/>	Full-Time	<input type="checkbox"/>	Rental
		<input type="checkbox"/>		<input type="checkbox"/>	Other
If Other Describe:					
<b>Do you have pets?</b> Yes <input type="checkbox"/> No <input type="checkbox"/> (Pets prohibited except on lots A1-A32, C2, G33-G54, J1-J48)					
If YES, pet's name/s, age/description/breed/weight:					
Photo: Yes <input type="checkbox"/> License: Yes <input type="checkbox"/> Pet Vaccination record: Yes <input type="checkbox"/> Include copy of Photo, license, and pet vaccination records					

**I hereby certify that I have received a copy of the Cypress Bend RV Resort Condominium documents  
I agree to notify the Association of any address change and to abide by the Rules & Regulations of the Resort**

I have been	<input type="checkbox"/>	I will be	<input type="checkbox"/>	Provided with two (2) keys to the clubhouse facilities & keys to the Post Office Box
				Date: _____
<b>Signed: New Owners</b>				_____
				Date: _____

**PREVIOUS OWNER INFORMATION**

**I hereby certify that we plan to transfer the property to the new owners as indicated and certify I/we have given a copy of the Cypress Bend RV Resort Condominium documents, including the Rules & Regulations.**

<b>Signed: Previous Owners</b>	_____	Date: _____
	_____	Date: _____

**Please Complete or answer the following:**

**1. Return this form to the Cypress Bend office for the required approval, Allow a minimum of 2 weeks for processing.**

**2. Should we send an original to the closing agent for recording purposes?** Yes  No

**3. List your complete forwarding address and phone numbers:**

<b>Mailing Address:</b> _____
<b>Phone:</b> _____ <b>Email:</b> _____

Approved By:	_____	Date: _____
Rejected By:	President, Cypress Bend RV Resort Condominium Association, Inc.	_____
Approved By:	_____	Date: _____
Rejected By:	Vice President, Cypress Bend RV Resort Condominium Association, Inc	_____
Approved By:	_____	Date: _____
Rejected By:	Secretary, Cypress Bend RV Resort Condominium Association, Inc.	_____