

ESTOPPLE APPLICATION
TO BE COMPLETED BY REQUESTOR

The fee for a completion of our Estoppel letter form or transfer/closing form is, payable to Pepitone Properties Corp per the current fees charged and mailed to us at the address above.

We will not answer questions pertaining to the 3 items listed below, and only relating to the seller as an accommodation and upon your insistence to complete our form only.

1. Questions are legal conclusions
2. Inappropriate to accept any liability
3. Information can be obtained through review of various public county records, owner's inspection of official association records per statute and/or should be completed by an attorney.

I/we accept on behalf of our firm to authorize payment for a completion of your form per the above and agree to full payment within 30 days, if the unit closes or not by acknowledgment of our signature below. The undersigned parties will fully cooperate if adjustments for clerical errors on any or all documents is necessary and will sign such additional documents as are necessary to correct such errors; Please mail, e mail or fax back to us, upon receipt of the signed form, we will start to fill out and send back to you within Ten (10) business days of receipt.

_____ on behalf of _____

Agent/Representative	Title	Company
Date	_____	_____
Association	_____	_____
Unit/Address	_____	_____
Seller	_____	_____
Buyer	_____	_____
Telephone (+ext)	_____	_____
Fax or Email of Agent Representative	_____	_____
Return Address of Agent/Representative	_____	_____

UPON CLOSING A COPY OF THE WARRANTY DEED MUST BE MAILED TO OUR OFFICE TO MAINTAIN/CHANGE OWNERSHIP RECORDS.

8890 Salrose Lane, Suite 200, Fort Myers, FL. 33912. Fax 239-481-0409 Or bookkeeping@pepitone Realty.com

_____ **Association,**
 Phone 239-481-5959 | Fax 239-481-0409
Bookkeeping@pepitone Realty.com

ESTOPPEL CERTIFICATE
TO BE COMPLETED BY REQUESTOR

CLOSING DATE ESTIMATED TO BE ON: _____

REQUESTOR: _____

UNIT OWNER(S) / SELLER(S): _____

UNIT ADDRESS: _____

ASSESSMENT INFORMATION
TO BE COMPLETED BY MANAGEMENT FIRM

DATE OF ISSUANCE: _____ EXPIRATION OF EFFECTIVE PERIOD: _____

The following is an itemized list of all assessments, special assessments, and other moneys owed as of the Date of Issuance of this Certificate to the Association by the Unit Owner for the Unit noted above together with any additional assessments, special assessments, and other moneys that are scheduled to become due during the Effective Period of the Certificate.

1. The regular periodic assessment (the "**Assessment**") levied against the Unit is \$ _____ per _____.
2. The Assessment is paid through _____.
3. The next Assessment is due _____ in the amount of \$ _____.
4. Is the account delinquent? Yes No
 - a. If yes, has the account been turned over to an attorney for collection? Yes No
Total amount due to bring account current: _____
The contact information for the attorney handling the collection of the account is:

5. Are there any unpaid or pending special assessments against this Unit? Yes No
 - a. The amount of the special assessment is \$ _____
 - b. The special assessment is due and payable on _____
6. Are there any fines or other moneys owed or scheduled to become due for this Unit? Yes No
 - a. The amount is \$ _____
 - b. Due and payable \$ _____

OTHER INFORMATION

1. Is there a fee for preparation and delivery of this Estoppel Certificate? Yes No
An Estoppel Certificate Fee of \$_____ is due upon preparation of the Estoppel Certificate or
 at closing.
(Make check(s) payable to _____)

2. Is there a capital contribution fee, resale fee, transfer fee, or other fee due? Yes No
 Capital Contribution Fee of \$_____ is due **at closing**.
 Resale Fee of \$_____ is due **at closing**.
(Make check(s) payable to _____)
 Transfer Fee of \$_____ is due **at closing**.
(Make check(s) payable to _____)

3. Are there any open violations of any rule or regulation, or any restriction in the Declaration, noticed to the Unit Owner in the Association official records? Yes No

4. Do the rules and regulations or any governing document of the Association applicable to the Unit require approval by the Board of Directors of the Association for the transfer of the Parcel? Yes No

5. The following storage lockers, parking spaces, etc., are assigned for the exclusive use of the Unit Owner of this Unit: _____

6. Is there a right of first refusal provided to the Members or the Association? Yes No

7. Are there any other associations for which the Unit is a member? Yes No

8. Contact information for all insurance maintained by the Association: _____

Please remit a copy of the WARRANTY DEED and SETTLEMENT STATEMENT as well as all CHECKS (payable to either the Association or Pepitone) to:

_____ ASSOCIATION, _____
c/o Pepitone Properties
8890 Salrose Lane, Ste 200
Fort Myers, FL 33912

The responses herein are made in good faith and to the best of my ability as to its accuracy.

Signature

Phone

Fax

Email: