

Notice to Association**Owner: Please complete Section 1 below.**

Date: _____

Association/Condo Name: _____

To: ☐ Association Representative: _____ Phone _____ Fax _____
☐ Management Company: _____ Phone _____ Fax _____**Re: Authorization of Real Estate Agent**

This notice confirms that, effective _____, the following real estate licensee is authorized to represent me/us in selling and/or renting the property located at:

(street address and unit number)Licensee: _____
Brokerage Firm: _____
Address: _____
Phone: _____ Fax: _____ Email: _____**Section 1:** I authorize the licensee to:

- ☐ Obtain copies of all association documents, including master association documents and the Q&A sheet
- ☐ Receive copies of the current annual budget and most recent year-end financial report
- ☐ Arrange for painting and/or repairs
- ☐ Other: _____

Your cooperation with my/our agent is appreciated.

_____ Owner	/_____ Date	_____ Printed Name
_____ Owner	/_____ Date	_____ Printed Name

Association Representative/Management Co.: Please complete Section 2 and return to the authorized real estate licensee.**Section 2:**

Total number of units _____ Number of units rented (if applicable): _____

Is an application required for purchase? ☐ Yes ☐ No Application Fee \$ _____Is a purchaser interview required? ☐ Yes ☐ No Does the association hold right of first refusal? ☐ Yes ☐ NoAre pets allowed? ☐ Yes ☐ No If yes, what type? _____Maximum number of pets allowed: _____ Any weight limits? ☐ Yes ☐ No If yes, permitted weight: _____Are tenants allowed to have pets? ☐ Yes ☐ No ☐ Other: _____

Vehicle restrictions? Yes ☐ No ☐

If yes, please specify: _____

Maximum number of vehicles permitted: _____

Parking options: Covered ☐ Garage ☐ Open ☐ Assigned ☐ Deeded ☐ Space # _____

Pickup trucks allowed? Yes ☐ No ☐

Commercial vehicles allowed? Yes ☐ No ☐

Motorcycles allowed? Yes ☐ No ☐

Rental restrictions? Yes ☐ No ☐

If allowed, maximum term: _____

Tenant application fee: \$ _____

Is a tenant interview required? Yes ☐ No ☐

Age-restricted community?

55+ ☐ Yes ☐ No

62+ ☐ Yes ☐ No

RV/boat storage available? Yes ☐ No ☐

Camper/motor home storage available? Yes ☐ No ☐

Dock available? Yes ☐ No ☐

Deeded? Yes ☐ No ☐

Space available? Yes ☐ No ☐

Accessible to: Tenant ☐ Yes ☐ No ☐ | Purchaser ☐ Yes ☐ No ☐

Cost: \$ _____

Unit Association fee? Yes ☐ No ☐

If yes, amount: \$ _____

Payment frequency: Monthly ☐ Quarterly ☐ Annually ☐

Master Association fee? Yes ☐ No ☐

If yes, amount: \$ _____

Payment frequency: Monthly ☐ Quarterly ☐ Annually ☐

Recreation lease/land lease? Yes ☐ No ☐

If yes, amount: \$ _____

Payment frequency: Monthly ☐ Quarterly ☐ Annually ☐

Pending assessments? Yes ☐ No ☐

If yes, explain and note payments already made:

Are all assessments current? Yes ☐ No ☐

If no, list outstanding balance: _____

Club or recreation facility privileges:

Available to tenants? Yes ☐ No ☐

Available to owners? Yes ☐ No ☐

Cost: Tenant \$ _____ | Owner \$ _____

Please describe recreation facilities: _____

Other information: _____

Completed by: _____ By: _____
Firm/Title

Phone: _____ Printed Name _____

Fax: _____ Email: _____