UNIT #\_\_\_\_\_ INTERROGATORY

#### **INTERROGATORY TO BE ANSWERED BY ALL PROSPECTIVE PURCHASERS**

NOTE: The following questions must be answered truthfully and completely. No information should be withheld. Approval of the purchase will be determined in part on the basis of your replies to the questions. Any falsification, deception, withholding of pertinent information or misleading answers will justify disapproval.

- 1. What is/are your full name(s) and present addresses?
- 2. Are the foregoing the same person(s) named in the original purchase application? If not, explain.
- 4. Do you own any other real property (i.e. house, condominium, etc.) in Florida or elsewhere? If so, please list the complete addresses whether you presently reside in any of these locations or not.
  Yes \_\_\_\_ No \_\_\_\_
  Please list the complete addresses

5. Do you lease or rent any of these properties to others? Yes \_\_\_\_\_ No \_\_\_\_\_

- 6. Question. What is your present business, trade, or occupation? Answer.
- 7. Question. If not retired, when do you intend to retire? Answer.

| Lyndhurst | С- | Rev130228 |
|-----------|----|-----------|
|-----------|----|-----------|

UNIT #\_\_\_\_\_ INTERROGATORY

- Question. If retired, when did you retire and what were your former business, trade, or occupation? Answer.
- 9. Are you aware that Lyndhurst C is "Not a Rental Building". Are you aware that under the Lyndhurst C documents as amended, the rental of units as a business or for investment is prohibited except in special cases of undue hardship (defined as death and/or illness) and at the discretion of the board of directors? Yes \_\_\_\_\_ No \_\_\_\_
- 10.Are you aware that Article 9.1 of the Declaration of Condominium as amended reads in part as follows: "Each Unit is hereby restricted to <u>residential use</u> as a single family residence by the owner(s) thereof, their immediate families, guests and invitees."? Yes \_\_\_\_\_ No \_\_\_\_\_
- 11.Are you aware of the restrictions contained in the documents requiring occupancy (defined as being in physical possession of the unit) by at least one (1) person fifty-five (55) years or older; and that any occupant under the age of fifty-five (55) years, who may be residing in the unit without a person who is fifty-five years or older simultaneously occupying the unit, may not be permitted to remain? Yes \_\_\_\_\_ No \_\_\_\_\_
- 12. Are you aware that Article 12.1(b) as amended reads as follows: "No unit owner may dispose of a Unit or any interest in a unit by lease or allow the occupancy thereof without the approval of the Lessee or occupant by the Association? No lease may be made for less than a three month consecutive period, but only one (1) such lease may be made within any 12 month consecutive period, nor shall any transient accommodations be provided. Leasing of units as a regular practice for business, investment, speculation or such purpose is prohibited..."
- 13. Do you agree that, if approved, you will abide by and comply with our Condominium documents, including the Declaration of Condominium, the By-Laws and the Articles of Incorporation which require, regulate and control the use of and conduct in the condominium property? Yes \_\_\_\_ No \_\_\_\_

UNIT #\_\_\_\_\_ INTERROGATORY

| 14. Are you aware that, in view of the foregoing amendments, the Association the leasing or renting of units; and has refused approval of any purchases the units for such purposes.,  | aser who  |  |
|--|---|--|
| 15. If you plan to have anyone occupy your unit in your absence, are you which require the consent of the Board?   |   | provisions<br>No                       |
| 16. Do you plan to make any alterations/modifications to the unit before or<br>possession of the unit if approved?   | -   | u take<br>_ No                         |
| 17. Are you aware that any alterations/modifications require the approval of   |   | sociation?<br>_No                      |
| 18. Are you aware of the restrictions prohibiting pets?  | Yes   | _No                                    |
| 19. Are you aware that each unit has an assigned parking space and that have exclusive use of any Guest space?   |   | Owner may<br>_No                       |
| 20. Do you have any children? If so, set forth their names, ages and address   | ses.  |  |
|  |   |  |
| 21. Are you aware that our documents prohibit the permanent residence in<br>under the age of eighteen (18) years? Children under eighteen (18) ye<br>more than two (2) consecutive weeks, with a total of not more than<br>calendar year?  | ars may<br>thirty (30                           | visit for no                           |
| 22. How many persons will reside in the unit permanently? Only a manadults may reside in a one bedroom unit and four adults may reside in a Only a maximum of two (2) ID's will be issued in a one-bedroom unit three (3) ID's in a two-bedroom unit. ID's required Are you aware that all permanent residents are to be approved by the A | a two bec<br>and a m<br>_ (indicat<br>ssociatio | lroom unit.<br>aximum of<br>e number). |

UNIT #\_\_\_\_\_ INTERROGATORY

- 23. Are you aware of the fact that if the unit you intend to purchase is to be occupied by a parent(s) or other relative(s), you must sign an affidavit that you waive the right to obtain an ID card or auto decal for as long the unit is still so occupied? Yes\_\_\_\_ No\_\_\_\_
- 24. Are you aware that the Association must approve any mortgage or encumbrance on the Unit? Yes \_\_\_\_ No \_\_\_\_
- 25. Are you aware Florida Law requires that the purchase of any articles of furniture or other personal property be handled separately and apart from the purchase of the unit; that the purchase price set forth in the contract must not include any consideration for such items and that the documentary stamps to be placed on the deed submitted for recording will be based only on the value of the unit, excluding furniture or other personal property?

| 26. Please supply the following breakdown inf | ormation:                                       |
|---|---|
| Sale Price of Unit                            | \$  |
| Price of Furniture/personal property          | \$  |
| Total price paid                              | \$  |
|   | ortgage or encumbrance that has been incurred   |
| in the purchase of unit                       | \$  |
| Please list the complete details with         | name(s) and addresses / telephone number        |
|   |   |
|   |   |
|   |   |
| 27. Please provide amount of monies / equity  | that you used from your own funds for the total |

| purchase of the unit                          | \$     |  |  |  |
|---|--------|--|--|--|
| 28. Have you ever been convicted of a felony? | Yes No |  |  |  |

| - | If Yes, give details of conviction: |
|---|-------------------------------------|
|   |                                     |

| Yes | No |
|-----|----|
|     |    |

Yes

No

If Yes, give details of offence:

29. Have you ever served time in prison?

| Lyndhurst | C - | Rev130228  |
|-----------|-----|------------|
| Lynanaise | -   | 1101100220 |

| L   | -        |              | dominium Ass                                       |           | on        |    |
|---|----------|--------------|--|-----------|-----------|----|
|   | _        |              | Beach FL 3344<br>INTERROGA                         | -         |           |    |
|   | UNIT     | "            |  |           |           |    |
| 30.Are you on parole?   | Yes      | No           | Are you on probat                                  | tion?     | Yes       | No |
| 31.Are you aware of th<br>of the statements r<br>of the unit? |          |              | val, if given, is based u<br>y with respect to the | •         | cy and pr |    |
| INTERROGATO   | RIES TO  | BE SIGNED    | BY PROSPECTIVE                                     | PURCHA    | SER(S)    |    |
| Date  | Purchase | r's signatur | re   |           |           |    |
| F   | urchase  | r's signatur | e  |           |           |    |
| F   | urchase  | r's signatur | e  |           |           |    |
| Witnesses:  |          |              |  |           |           |    |
|   |          |              |  |           |           |    |
|   |          |              |  |           |           |    |
| State of  |          |              |  |           |           |    |
| County of   |          | -            |  |           |           |    |
| On this   | day c    | of           | , 20, before<br>to me known and k                  |           |           |    |
| described herein and wh answers given were true a             |          | -            | g Questionnaire and du                             | ly acknow |           |    |
| My Commission expires:  |          |              |  |           |           |    |
|   |          |              | Notary Public Signa                                | ature     |           |    |
|   |          |              |  |           | (SEAL)    | )  |
| Lyndhurst C - Rev130228                                       | 1        |              | 5 of 5   |           |           |    |