

TIFFANY LAKE INTENT TO SELL

Unit Owner Name: _____

Unit Owner Address: _____

Unit Owner Contact Information (phone/email): _____

Unit No. for Sale: _____

Minimum Sales Price Willing to Accept: \$ _____¹

Closing Date (usually 45 days, if longer term needed, specify) _____

[check one] ☐ Unit is Leased (Rental Rate \$ _____; Expires: __/__/__)
☐ Unit is Vacant

[check one] ☐ Unit is subject to mortgage(s) (approx. balance due: \$ _____)
☐ Unit is free and clear of liens

List all known issues of condition of Unit, including appliances, HVAC system, electrical, plumbing, fixtures etc.:

[check one] ☐ Unit is listed for sale with: _____
☐ Unit is for sale by owner

Owner's Signature:

Date: _____

¹ Sales price is gross sales price, and customary expenses shall be deducted therefrom, including, but not limited to, documentary stamp tax, search, settlement and title premiums, prorations for property taxes and condominium assessments