



## **The Dana Point Condominium Association**

### **CHECKLIST FOR SALE OF UNIT**

**The List below is a summary of the items needed to release a Paid Assessment Letter for sale of a unit:**

- Notice of Intent to Sell
- Signed copy of Sales Contract
- Purchaser Information Form-buyer
- \$150 Move in Fee from Buyer (non-refundable)- payable to Dana Point Condominium Association
- Rules/Regulations Acknowledgement Form- buyer
- Completed LMS Document Order forms
- Key Inventory Form must be picked up from the on-site office and returned within 10 days of the closing.

**All documents must be received prior to the issuance of the Paid Assessment Letter.**

**ALL MOVES MUST BE SCHEDULED WITH THE ONSITE OFFICE, AND A MOVE PERMIT IS REQUIRED (issued by site office)**

**Moving hours are 7:00 am to 8:00 pm Monday-Saturday, and Sunday 10:00 am to 4:00 pm. (No Holidays). One move per building per day.**

## **NOTICE OF INTENT TO SELL**

To: Board of Directors of The Dana Point Condominium Association

From: Unit Owner Name: Freddie Mac

Unit Address: 1615 E. Central Road Unit 422 C

Owner off-site Address: 15W030 N. Frontage Rd.

City: Burr Ridge State: IL Zip: 60527

Owner Phone #: (130-568-40810 Cell #:

Owner Forwarding Address: 15W030 N. Frontage Rd.

City: Burr Ridge State: IL Zip: 60527

### **NOTICE OF INTENT**

In accordance with the Declarations and the Rules and Regulations for The Dana Point Condominium Association established by the Board of Directors, I (we) hereby submit to the Board, this Notice of Intent to sell the above listed unit to the party or parties (and only those parties) named herewith and upon the terms specified in the attached contract. The tender to and receipt by the Board of this completed form shall constitute valid notice of my intention to sell the unit.

All assessments must be paid through the month of closing before release will be issued. After all payments of assessments and fees are made, the Association will issue a release letter stating that all assessments and fees have been paid.

#### **Terms of Sale:**

Attached is a true and fully executed copy of the contract of sale setting forth all the terms of the agreement between the parties.

Sellers Agent/Attorney: Codwill & Associates

Selling Agent/Attorney Address: 15W030 N. Frontage Rd.

City: Burr Ridge State: IL Zip: 60527

Selling Agent/Attorney Phone #: (130-568-40810

Danielle Piecynski - AS AGENT 4/28/2013  
Selling Owners' Signature Date

Selling Owners' Signature

Date

## PURCHASER INFORMATION

Unit address: \_\_\_\_\_

Seller Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Anticipated Closing Date: \_\_\_\_\_

\*\*\*\*\*

Buyer's Name: \_\_\_\_\_

Current Address: \_\_\_\_\_ Apt #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

\*\*\*\*\*

List below all other persons who will reside in the unit:

Name: \_\_\_\_\_ Relationship to purchaser: \_\_\_\_\_

Below please indicate **EXACTLY** how your name should read for all directories and intercom system along with the phone number you want your guests to call when using the intercom for building entry.

Name: \_\_\_\_\_ Phone # \_\_\_\_\_

\*\*\*\*\*

### Financial Information

If the unit will be mortgaged, please provide the following information:

Name of Mortgaging Financial Institution: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Are there any unsatisfied or unreleased judgments, decrees or liens of record against you in court?

Yes ( ) No ( )

Are you party to any litigation in any court of record? Yes ( ) No ( )

\*\*\*\*\*

Attorney Information

Seller's Attorney:

Codulis & Associates

Address:

15W030 U Frontage Rd Burr Ridge, IL  
60527

Phone:

1030-568-4090

Fax:

1030-568-4097

Buyer's Attorney:

\_\_\_\_\_

Address:

\_\_\_\_\_

Phone:

\_\_\_\_\_

Fax:

\_\_\_\_\_

\*\*\*\*\*

Rules and Regulations

The association rules and regulations prohibit dogs in all second, third, and fourth floor units, has a dog limit of one dog under 35 pounds for any first floor unit, and a pet count limit applies. Your signature below confirms you understand all pet rules in the Rules and Regulations and agree to abide by them.

Have you been furnished with a copy of the Declaration, By-laws and Rules and Regulations for the association (the governing documents for the association)? Yes ( ) No ( )

I/We certify the information provided in this form is true and complete. I/We do hereby declare that I/We have received and reviewed the Declaration, By- Laws, and Rules and Regulations for The Dana Point Condominium Association, and any Amendments or revisions thereto. I/We further agree to abide by them and at all times, to hold our interest in the Condominium subject to the rights, privileges, and restrictions therein set forth or hereafter set established by the Owners or Board of Directors as duly provided for in the Declaration of Condominium Ownership.

\_\_\_\_\_  
Signature of Buyer

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Signature of Buyer

\_\_\_\_\_  
Today's Date

## **THE DANA POINT CONDOMINIUM ASSOCIATION**

### **RULES & REGULATIONS AFFIDAVIT**

I/We the intended Purchaser(s) of Unit # \_\_\_\_\_ located at (insert street address)

\_\_\_\_\_  
do hereby  
declare that I /We have received and reviewed the Rules and Regulations for The Dana Point  
Condominium Association, and any Amendments or revisions thereto.

I/We agree to abide by them and at all times to hold our interest in the Condominium subject to  
the rights, privileges and restrictions therein set forth or hereafter set established by the Owners  
or Board of Directors as duly provided for in the Declaration of Condominium Ownership.

---

Purchaser's Signature

---

Date

---

Purchaser's Signature

---

Date

---

Unit / Address

---

Parking Spaces(s) / Storage Unit