

WILLOW WOOD VILLAGE HOMEOWNERS ASSOCIATION, INC.
DeSantis Community Management, LLC
Phone: (727) 440-5225
Mailing Address: 2931 Macalpin Dr S, Palm Harbor FL 34684
Info@DeSantisMgmt.com

NAME: _____ FROM: _____
(BUYER) (SELLER)

Address: _____ Unit: _____ City: _____ ST: _____ Zip: _____

ANTICIPATED CLOSING DATE: _____

PERSON(S) WHO WILL OCCUPY THIS UNIT ARE AS FOLLOWS:

A) NAME: _____ AGE: _____
B) NAME: _____ AGE: _____
C) NAME: _____ AGE: _____
D) NAME: _____ AGE: _____

AUTOMOBILES: MAKE: _____ MODEL: _____ TAG: _____
MAKE: _____ MODEL: _____ TAG: _____

PETS (MAXIMUM 3):

NAME: _____ BREED: _____ COLOR: _____
NAME: _____ BREED: _____ COLOR: _____
NAME: _____ BREED: _____ COLOR: _____

VETERINARIAN NAME: _____

ADDRESS: _____ NUMBER: _____

A COPY OF ALL VALID VACCINATION RECORDS MUST BE SUBMITTED WITH THIS FORM YEARLY.

I (Buyer) acknowledge that I have read and agree to abide by the rules and regulations of the Community and Pet

Policy: _____ (Buyer signature)

BUYERS' PRESENT ADDRESS:

Address: _____ Phone #: _____

City: _____ St: _____ Zip: _____

NEXT OF KIN – FOR EMERGENCIES:

Name: _____ Phone #: _____

Address: _____ City: _____ St: _____ Zip: _____

Buyer's email address: _____

SIGNATURES:

Seller: _____ Buyer: _____

Seller: _____ Buyer: _____

RETURN THIS FORM TO:

DeSantis Community Management, LLC

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