

## ESTOPPEL CERTIFICATE

1. DATE OF ESTOPPEL CERTIFICATE: \_\_\_\_\_
2. NAME OF CURRENT OWNER(S): \_\_\_\_\_
3. NAME OF PROSPECTIVE BUYER(S): \_\_\_\_\_
4. ADDRESS OF PROPERTY: \_\_\_\_\_
5. PARKING AND/OR GARAGE SPACE NUMBER: \_\_\_\_\_
6. IS THIS ACCOUNT DELINQUENT: YES \_\_\_\_\_ NO \_\_\_\_\_ IF THIS ACCOUNT HAS BEEN REFERRED TO AN ATTORNEY, PLEASE PROVIDE ATTORNEY CONTACT INFORMATION:  
\_\_\_\_\_  
\_\_\_\_\_
7. NAME OF COMPANY REQUESTING ESTOPPEL CERTIFICATE: \_\_\_\_\_
8. IS THERE ANY SPECIAL ASSESSMENT ON THE UNIT: YES \_\_\_\_\_ NO \_\_\_\_\_
  - (A) EFFECTIVE DATE OF THE SPECIAL ASSESSMENT: \_\_\_\_\_
  - (B) HAS IT BEEN PAID: YES \_\_\_\_\_ NO \_\_\_\_\_ IF NO, PLEASE STATE:
    - (I) THE BALANCE DUE OF THE ASSESSMENT: \_\_\_\_\_
    - (II) THE DATE(S) THE PAYMENT(S) MUST BE PAID: \_\_\_\_\_
    - (III) THE PURPOSE OF THE ASSESSMENT: \_\_\_\_\_  
\_\_\_\_\_
9. DO YOU ANTICIPATE MAKING A SPECIAL ASSESSMENT IN THE NEXT THREE MONTHS: YES \_\_\_\_\_ NO \_\_\_\_\_  
IF YES, PLEASE PROVIDE DETAILS: \_\_\_\_\_  
\_\_\_\_\_
10. ANY OTHER INFORMATION TO BE DISCLOSED: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* Per Florida Statute 720.30851

**MONTHLY MAINTENANCE INFORMATION:**

1. AMOUNT OF MONTHLY MAINTENANCE FEE: \_\_\_\_\_
2. CURRENT OWNER(S) PAID MAINTENANCE IN FULL THROUGH: \_\_\_\_\_
3. NEXT MONTHLY MAINTENANCE FEE DUE DATE: \_\_\_\_\_
4. MONTHLY MAINTENANCE FEE PAYMENTS ARE DUE ON: \_\_\_\_\_
5. THE AMOUNT OF PENALTY OR CHARGE FOR LATE PAYMENTS IS: \_\_\_\_\_
6. IF A CHANGE IN THE MONTHLY MAINTENANCE FEE IS EXPECTED, WHEN WILL IT BE: \_\_\_\_\_
7. WHAT WILL BE THE NEW ESTIMATED AMOUNT OF THE MONTHLY MAINTENANCE FEE: \_\_\_\_\_
8. ITEMIZATION OF OTHER MONEYS OWED: \_\_\_\_\_

**OTHER INFORMATION:**

1. IS THERE AN ESTOPPEL CERTIFICATE FEE: YES \_\_\_\_\_ NO \_\_\_\_\_ AMOUNT DUE: \_\_\_\_\_
2. IS THERE A CONDOMINIUM TRANSFER FEE: YES \_\_\_\_\_ NO \_\_\_\_\_ AMOUNT DUE: \_\_\_\_\_
3. IS THERE ANY OPEN VIOLATION OR RULE OR REGULATION NOTICED TO THE PROPERTY OWNER IN THE ASSOCIATION OFFICIAL RECORDS: YES \_\_\_\_\_ NO \_\_\_\_\_
4. DO THE RULES AND REGULATIONS OF THE ASSOCIATION APPLICABLE TO THE PROPERTY REQUIRE APPROVAL BY THE BOARD OF DIRECTORS OF THE ASSOCIATION FOR THE TRANSFER OF THE PROPERTY: YES \_\_\_\_\_ NO \_\_\_\_\_  
IF YES, PLEASE PROVIDE DETAILS: \_\_\_\_\_  
IF YES, HAS THE BOARD APPROVED THE TRANSFER OF THE PROPERTY: YES \_\_\_\_\_ NO \_\_\_\_\_
5. IS THERE A RIGHT OF FIRST REFUSAL PROVIDED TO THE MEMBERS OF THE ASSOCIATION: YES \_\_\_\_\_ NO \_\_\_\_\_
6. HAVE THE MEMBERS OR THE ASSOCIATION EXERCISED THAT RIGHT OF FIRST REFUSAL: YES \_\_\_\_\_ NO \_\_\_\_\_
7. PROVIDE CONTACT INFORMATION FOR ALL INSURANCE MAINTAINED BY THE ASSOCIATION: \_\_\_\_\_  
\_\_\_\_\_
8. NAME AND SIGNATURE OF PERSON PROVIDING INFORMATION:

\_\_\_\_\_  
(SIGNATURE) DATE: \_\_\_\_\_

\_\_\_\_\_  
(TITLE)