

**CAMPER'S HOLIDAY ASSOCIATION  
BUYER'S APPLICATION FOR THE PURCHASE OR TRANSFER OF UNIT**

The undersigned submit this application for approval of the Board to acquire ownership of Unit # \_\_\_\_\_, within Camper's Holiday. The undersigned state that the following information is true and correct to the best of our knowledge. (Any intentional misrepresentation shall be basis for automatic disapproval.)

NAME(S) OF NEW OWNER(S): (Birth date & copy of license required for 55+ Certification with State of Florida)

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ADDRESS, if other than Camper's Holiday

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TELEPHONE NUMBER(S)

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CERTIFICATION: Board member interview will not be scheduled until you have had the opportunity to read the documents listed here. I certify that I have received a copy of the Handbook Book of Rules and Regulations. I have read, understand and agree to abide by the rules that are contained therein.

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

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

CHARACTER WITNESSES:

Name \_\_\_\_\_ Phone# \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Name \_\_\_\_\_ Phone# \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_