

## Dear Condo Owner:

Congratulations on the pending sale of your unit!

The Regency House Condominium Association has a right of first refusal on the sale of all units in the building and has given its Board of Directors responsibility to review information concerning potential buyers in order to make a qualified judgment as to whether to exercise the refusal right.

If the Regency House is to remain a premier residence on Milwaukee's lake front, owners must have the financial capacity to fulfill their obligations for all common charges and assessments. A Buyer Application is required in order to demonstrate the level of financial stability necessary to enable the Association to waive its right of first refusal on the unit.

It is the responsibility of the seller to submit the following to the RHCA Office at least **30** days prior to the scheduled closing date:

- Completed Buyer Application
- A copy of the Offer to Purchase
- \$150 Processing Fee—to cover the cost of background checks, preparation of documents, and other related costs.

Please note that submitting an incomplete application will delay the approval process.

We thank you for your assistance. Please feel free to contact the RHCA Office with questions at (414) 276-8599.

Sincerely,

RHCA Management Team

Regency House Condominium Association 929 N. Astor Street, Milwaukee, WI 53202 Office: (414) 276-8599 Fax: (414) 276-8536



## REGENCY HOUSE CONDOMINIUM ASSOCIATION BUYER APPLICATION

		Unit Number:						
Current Unit Owner:	Closing	Closing Date:						
Unit Owner Contact Number:		Sale Price:						
Please be advised that the R.H	.C.A. does not	conduct any	personal intervie	ws in regards	s to this application.			
PLEASE TELL US ABOUT Y	OURSELF (E	ach adult oc	cupant must co	mplete a se	parate application.)			
Name of Unit Owner as it will appear	on the deed:							
Full Name:	Other Names Used:							
Address:		City, Sta	te, And Zip:					
Home Telephone #:	Cell Phone #:							
E-mail Address:			Date	of Birth:				
Social Security Number:	Wisconsin Driver's License #:							
Current Landlord or Lender:	Telephone:							
Current Amount of Rent or Monthly M	y Mortgage Payment: Length of Residency:							
Outstanding Balance on Current Mor	tgage:							
Have you ever been convicted of a n	on-traffic related	criminal offense	e? If yes,	please explain:				
List anyone else who will occupy the	unit:							
Name:		SSN:		Date of Birth:**				
Name:		SSN:		Date of Birth:**				
**If 21 years or older, they must c	omplete a separ	ate application	1.					
List any pets that will occupy the unit	or regularly visit:							
Pet(s):	Breed(s	s):			_			
		Weight(s):						
PLEASE PROVIDE YOUR EN	MPLOYMENT.	INCOME IN	FORMATION					
Employment Status: □Full Time				□Retired	□Self-Employed			
	Telephone:							
	City, State, Zip:							
	Name of Supervisor:							
How long employed?	Monthly		Other Income:					
Other sources of income: Type:			N	Monthly Amount:				
Туре:		:						
Туре:			N	Ionthly Amount	:			
Do you plan to use your home as an	office?	If yes, pleas	se describe your busi	ness				
Will you have clients visiting for busing	ness purposes? If	f yes, please de	scribe					
What type of insurance do you carry	for operating a be	usiness out of y	our home?					

PLEASE DESCRIBE YO	OUR CREDIT HISTORY					
Have you ever declared bankı	Yes	No	When			
Have you ever been evicted fr	om a rental residence or had eviction	n				
proceedings filed against you?	Yes	No	When When When			
Have you had two or more late	Yes	No				
Have you ever refused to pay	Yes	No				
Please explain any "yes" answ	vers.					
Banking Accounts:						
_	Type of Account		Account Number			
			Account Number			
Credit Accounts: (auto Ioan:	s, personal loans, credit cards)					
Name	Type of Account		Account Number			
Name	Type of Account		Account N	_ Account Number		
Name:	AL REFERENCES (not an e		Relat	onship:		
			Relationship:			
AUTHORIZATION AND	RELEASE					
l,			, the	undersigned applicant, aut	horize the	
in the Buyer Application. I f provide to Regency House an	o order and review my credit and crir urther authorize all banks, existing y and all information that may be red ims, liabilities, or actions which may with respect to such claims.	employees, crequested with res	editors, refere	ences and any and all other vestigation.	persons to	
I herby certify that all the infor	mation given above is true and corre	ect.				
Applicant Name (please pri	int) Signature			 Date		





## **Unit Selling Policy**

Unit Owners who are selling their unit, must follow the following guidelines:

- A completed Buyer Application must be turned in to the office at least 30 days prior to closing.
- The office must be notified of the closing date or any changes to the closing date.
- Full payment for the last month's charges must clear the bank prior to the closing date. This can be accomplished by paying via a cashier's check, submitting payment at least one month in advance, or paying the final month's charges out of escrow at the closing. If the charges are to be paid out of escrow, written documentation from the title company must be provided to the office.