

**JUPITER BAY CONDOMINIUM ASSOCIATION
ESTOPPEL CERTIFICATE**

Date of Issuance: _____

Dear Sir or Madam:

The following Estoppel information is being provided in response to your request received on _____.

Name(s) of the unit owner(s) as reflected in the books and records of the association:

Registered Owner

Co-Owner / Spouse

Unit number: _____ Address: _____

City _____ State & Zip Code _____

Parking or garage space number: _____ Open Parking _____

Attorney's name and contact information if the account is delinquent and has been turned over to an attorney for collection: _____

Fee for the preparation and delivery of the estoppel certificate: _____

Name of the requestor: _____

Assessment information and other information:

- a. The regular periodic assessment levied against the unit is \$ _____ per _____ (insert frequency of payment).
- b. The regular periodic assessment is paid through _____ (insert date paid through).
- c. The next installment of the regular periodic assessment is due _____ (insert due date) in the amount of \$ _____.
- d. An itemized list of all assessments, special assessments, and other moneys owed on the date of issuance to the association by the unit owner:

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- e. An itemized list of any additional assessments, special assessments, and other moneys that are scheduled to become due for each day after the date of issuance for the effective period of the estoppel certificate: (In calculating the amounts that are scheduled to become due, the association may assume that any delinquent amounts will remain delinquent during the effective period of the estoppel certificate.)

- f. Is there a capital contribution fee, resale fee, transfer fee, or other fee due?
___ (Yes) ___ (No). If yes, specify the type and the amount of the fee: _____

- g. Is there any open violation of rule or regulation noticed to the unit owner in the association official records? ___ (Yes) ___ (No).

- h. Do the rules and regulations of the association applicable to the unit require approval by the board of directors of the association for the transfer of the unit?
___ (Yes) ___ (No). If yes, has the board approved the transfer of the unit?
___ (Yes) ___ (No).

- i. Is there a right of first refusal provided to the members or the association?
___ (Yes) ___ (No). If yes, have the members or the association exercised that right of first refusal? ___ (Yes) ___(No).

- j. List of, and contact information for, all other associations of which the unit is a member: None.

- k. Contact information for all insurance maintained by the association:

(signature of an officer or authorized agent of the association)