

**ADVANCE PROPERTY MANAGEMENT**

**36 Commerce Street**

**P.O. Box 679**

**Glastonbury, CT 06033**

**Phone: (860) 657-8981, Fax: (860) 657-8970**

**To expedite your resale package, remember to:**

*Complete the entire form and submit the resale fee of \$125 in a check made payable to "APM". If you require expedited service, there will be an additional \$10 fee plus \$5 for mailing.*

*Return this form and your payment by fax to the number above or to Maria Morocco ([maria@advanceco.net](mailto:maria@advanceco.net)) You will receive an updated statement of account at the time of closing for an additional \$25 fee.*

**Resale Certificate Information Form**

Unit # \_\_\_\_\_ Association Name \_\_\_\_\_

Owner's Name(s) \_\_\_\_\_

Buyer's Name(s) \_\_\_\_\_

Sales Price \_\_\_\_\_ Expected Closing Date \_\_\_\_\_

Seller's Attorney \_\_\_\_\_ Phone # \_\_\_\_\_

Will buyer occupy the unit? yes \_\_\_\_\_ no \_\_\_\_\_

If no, please provide mailing address.

\_\_\_\_\_  
\_\_\_\_\_

Person requesting Resale Certificate \_\_\_\_\_

Phone # \_\_\_\_\_ Date certificate needed by \_\_\_\_\_

Will the certificate be picked up? yes \_\_\_\_\_ no \_\_\_\_\_

If no, please provide name and address of where to send the certificate:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Mailed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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To be completed by Advance Property Management

Fee Received

Date \_\_\_\_\_ Amount \_\_\_\_\_ Check # \_\_\_\_\_

Picked up by:

\_\_\_\_\_

Signature Date

\_\_\_\_\_

Print Name