

Vacant Unit Check

Re: Unit _____ Building _____

I/we, the undersigned owner(s) of Unit _____ at Turtle Bay Condominium, hereby notify Turtle Bay Condominium Owners Association, Inc. that _____, telephone (941) _____, email _____ is the person who will be periodically checking on the above-numbered Unit in my/our absence.

I/we understand that Turtle Bay Condominium Owners Association, Inc. requires each Unit Owner who intends not to be occupying the unit on a full-time basis to have arranged for the unit to be checked no less frequently than once every ___ weeks my/our absence; unit owner insurance coverage may impose a similar requirement.

I/we understand that this notification will remain in effect until a substitute notification is completed by the unit owner and received by Turtle Bay Condominium Owners Association.

Unit owner, no. _____
_____, 2022

Turtle Bay Condominium

Lynne Schooley, LCAM
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