

PINE RIDGE VILLAGE CONDOMINIUM ASSOCIATION
c/o Gervin Management
1280 Route 46, Parsippany, NJ 07054
RESALE NOTIFICATION FORM

**THIS FORM MUST BE FILED WITH THE ASSOCIATION IMMEDIATELY UPON SIGNING A
CONTRACT OF SALE**

ALL INFORMATION IS REQUIRED AND WILL BE KEPT CONFIDENTIAL AT THE OFFICE OF THE MANAGEMENT COMPANY.
FAILURE TO SUPPLY ALL INFORMATION WILL RESULT IN A DELAY OF PURCHASER'S MORTGAGE CO. QUESTIONNAIRE,
STATEMENT OF ACCOUNT AND CERTIFICATE OF INSURANCE, WHICH WILL DELAY THE CLOSING.

PLEASE COMPLETE THE FOLLOWING:

Date or anticipated date of closing: _____

Name of Seller: _____

Property Address: _____

Seller's Attorney (name, address, phone #): _____

Name of Purchaser: _____

Current Mailing Address: _____

Current Home Tel. #: _____ Cell #: _____

E-mail address: _____

Will purchaser reside in condominium being purchased? Yes No

Purchaser's Attorney (name, address, phone #): _____

A contract of sale has been entered into on the above property. The pertinent information is herewith
provided for your records.

Signed: _____ Date: _____

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