



APPLEWOOD POINTE

BLOOMINGTON

A COOPERATIVE COMMUNITY

Reservation Agreement

Reservation # _____

Name(s) _____ Phone _____

Street _____

City _____ State _____ Zip _____

Email 1 _____ Email 2 _____

Emergency Contact _____ Phone _____

The Reservation List (“List”) Agreement: I/we hereby deposit \$500.00 on _____, 20____, to be listed in line for unit selection and membership application in the Cooperative. I/we understand: (i) that all sale procedures and prices are determined by the Cooperative’s Bylaws and Occupancy Agreement, which supersede the List; (ii) the Cooperative and its managers (collectively the “Cooperative”) keep the List; (iii) the selling member may not be required to follow the List; and (iv) the Cooperative keeps the List for its members and only acts to facilitate the closing between the seller and purchaser. I/we understand the Cooperative may remove name(s) on the List for any reason or I/we may remove our name(s) from the List, and in either case, the deposit will be fully refundable. There will be no interest paid on this deposit. Money is refunded in joint tenancy, if applicable. There are restrictions regarding pets living in our cooperative. The Cooperative is smoke-free and vape-free.

Signed _____ Date _____

Received By _____ Check # _____
Applewood Pointe Representative

What are your unit preferences?

(circle any that apply)

Floor: 1st 2nd 3rd 4th

Unit Design: 1BR 1+Den 2BR 2+Den/Sunroom

Floor Plan: _____

Please make your check payable to: **Applewood Pointe Bloomington on Lyndale**

Mail to: 8341 Lyndale Ave. S., Bloomington, MN 55420

Phone: 952.881.3409 • Fax: 952.881.2439 • Email: bloomington@applewoodpointe.com