

**DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
DIVISION OF FLORIDA CONDOMINIUMS, TIMESHARES, AND MOBILE HOMES**

Condominium Association Candidate Certification Form*

I, _____, certify that I have read
(print name of candidate)

and understand to the best of my ability, the governing documents of:

_____,
(print name of association)

and the provisions of this chapter and any applicable rules.

Signed: _____
(signature of candidate)

Date: _____

*required by section 718.112(2)(d)3., of Chapter 718, Florida Statutes