

**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 and understand to the  
(print name of candidate)

best of my ability, the governing documents of:

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(print name of association)

and the provisions of Chapter 718 and any applicable rules.

Signed: \_\_\_\_\_  
(signature of candidate)

Date: \_\_\_\_\_

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