## FR/BAR CONTRACTS & RIDERS

## FOR THE SALE AND PURCHASE OF RESIDENTIAL PROPERTY

Approved by The Florida Bar, Real Property, Probate & Trust Law Section and The Florida Realtors \_\_\_\_\_Set(s) of 5 physical FR/BAR CONTRACTS (Revised December 2024) \$60.00 per set \_\_ Set(s) of 5 physical FR/BAR "AS IS" CONTRACTS (Revised December 2024) \$60.00 per set Package(s) of physical FR/BAR COMPREHENSIVE RIDERS (Revised Multiple Dates) \$80.00 per package (a package is 5 copies of each rider listed below) Condominium Rider Housing for Older Persons Homeowners' Association/Community Disclosure Rezoning Contingency Seller Financing (Purchase Money Mortgage Lease Purchase/Lease Option Security Agreement to Seller) Pre-Closing Occupancy by Buyer Assumption of Existing Mortgage(s) Post-Closing Occupancy by Seller Federal Housing Administration (FHA)/U.S. Sale Of Buyer's Property Department of Veterans Affairs (VA) Back-Up Contract Appraisal Contingency Kick Out Clause Short Sale Approval Contingency Sellers's Attorney Approval Homeowner's/Flood Insurance Buyer's Attorney Approval Mold Inspection Licensee Disclosure of Personal Interest in Property Interest-Bearing Account Binding Arbitration "As Is" Miami-Dade County Special Taxing District Disclosure Right to Inspection and Right to Cancel Seasonal and Vacation Rentals After Closing Defective Drywall Property Assessed Clean Energy (PACE) Disclosure Coastal Construction Control Line Credit Related to Buyer's Broker Compensation Insulation Disclosure for New Residence Seller's Agreement with Respect to Buyer's Broker Compensation Lead-Based Paint Disclosure (Pre-1978 Housing) Order Sub-Total \$\_\_\_\_\_ (Florida Residents Only) Sales Tax 7% UPS/FedEx Ground Shipping \$ \_\_\_\_14.00 **TOTAL** Attorney Bar #: Street Address: (WILL NOT DELIVER TO P.O. BOX) City/State/Zip:\_\_\_\_\_ E-mail address: Phone: (\_\_\_\_\_)\_\_\_\_ Mail this form with check to the address listed above or include credit card information and email (order@FLSSI.org). Exp. Date 3 Digit Code Card Number (VISA or MasterCard ONLY) Signature of Cardholder Charge Credit Card Billing Address (<u>If different from shipping address above</u>) **Printed Name of Cardholder** 

Check # \_\_\_\_\_\_ \$ \_\_\_\_ Authorization Date \_\_\_\_/\_\_\_/2024 # \_\_\_\_\_\_

Ship Date \_\_\_\_/\_\_\_/2025 LB\_\_\_\_\_ \$\_\_\_\_\_ # \_\_\_\_\_\_\_ \_\_\_ January 2025