

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 February 2026) \$60.00 per set
- _____ Set(s) of 5 physical FR/BAR “AS IS” CONTRACTS (Revised February 2026) \$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 Security Agreement to Seller) | Lease Purchase/Lease Option |
| Assumption of Existing Mortgage(s) | Pre-Closing Occupancy by Buyer |
| Federal Housing Administration (FHA)/U.S. Department of Veterans Affairs (VA) | Post-Closing Occupancy by Seller |
| Appraisal Contingency | Sale Of Buyer's Property |
| Short Sale Approval Contingency | Back-Up Contract |
| Homeowner's/Flood Insurance | Kick Out Clause |
| Mold Inspection | Sellers's Attorney Approval |
| Interest-Bearing Account | Buyer's Attorney Approval |
| "As Is" | Licensee Disclosure of Personal Interest in Property |
| Right to Inspection and Right to Cancel | Binding Arbitration |
| Defective Drywall | Miami-Dade County Special Taxing District Disclosure |
| Coastal Construction Control Line | Seasonal and Vacation Rentals After Closing |
| Insulation Disclosure for New Residence | Qualifying Improvements Disclosure |
| Lead-Based Paint Disclosure (Pre-1978 Housing) | Credit Related to Buyer's Broker Compensation |
| | Seller's Agreement with Respect to Buyer's Broker Compensation |

Order Sub-Total	\$ _____
Sales Tax 7%	\$ _____ (Florida Residents Only)
UPS/FedEx Ground Shipping	\$ <u>15.00</u>
TOTAL	\$ _____

Firm: _____

Attn: _____ Attorney Bar #: _____

Street Address: _____ (WILL NOT DELIVER TO P.O. BOX)

City/State/Zip: _____

Phone: (_____) _____ E-mail address: _____

Mail this form with check to the address listed above or include credit card information and email (order@FLSSI.org).

\$ _____ / _____ / _____

Charge **Card Number (VISA or MasterCard ONLY)** **Exp. Date** **3 Digit Code** **Signature of Cardholder**

Credit Card Billing Address (If different from shipping address above) **Printed Name of Cardholder**

Check # _____ \$ _____ Authorization Date ____/____/2026 # _____

Ship Date ____/____/2026 LB _____ \$ _____ # _____ March 2026