

GRANDE EXCELSIOR CONDOMINIUM ASSOCIATION
APPLICATION FOR LONG/SHORT TERM LEASE

IN ORDER TO EXPEDITE PROCESSING, COMPLETE APPLICATION
AND SUBMIT WITH THE FOLLOWING:

- 1) **The landlord / leasing agent must submit a mandatory national criminal history check with each application. (All adults occupying the unit must be named on the lease and are required to have a national criminal background check submitted.)**
- 2) Acceptable website for background check: www.sentrylink.com
- 3) Copy of signed lease between parties – to protect the unit owner all leases should state that they are subject to Board approval.
- 4) Application Fee - Check for \$150.00 payable to Grande Excelsior
(Non-Refundable) -CHECKS NOT ACCEPTED FROM LESSEE-
- 5) Lease Processing Fee - Check for \$250 Made payable to the Dunes POA
(Non-Refundable) -CHECKS NOT ACCEPTED FROM LESSEE-
- 6) Check for \$22.00 made payable to Dunes of Naples POA for each vehicle registered
(Non-Refundable) -CHECKS NOT ACCEPTED FROM LESSEE-
- 7) **Tenant must present a copy of the lease to guard upon arrival for access to the Dunes property.**
- 8) Applications must be submitted at least 20 days prior to the beginning of the lease period. Applications will not be accepted for consideration unless all required materials are present including payment of fees and background checks.

Return to: Grande Preserve Management
280 Grande Way, Naples, FL 34110
Office: 239-592-0989
grandepreserve@duneofnaples.com

NOTE:

- a) NO LEASE SHALL BE FOR LESS THAN THE ENTIRE UNIT AND SHALL BE FOR A MINIMUM OF 30 DAYS.
- b) It is the interpretation of The Board of Directors that "A unit may only be leased once during each ninety (90) day period" in the Declaration of Condominium to mean that a unit could not be leased for a period beginning less than ninety days after the beginning of the immediately preceding lease of the unit."
- c) **RENTERS ARE NOT PERMITTED TO HAVE PETS**

*Is lease applicant a person serving as a member of the United States Armed Forces on active duty, or state active duty, a member of the Florida National Guard, or a member of the United States Reserve Forces?"

_____ YES _____ NO

UNIT NUMBER _____ OWNER(S) OF UNIT: _____

LEASE PERIOD: FROM _____ TO _____

APPLICANT(S) TENANT(S) NAME: _____

ADDRESS _____ City _____ State _____ Zip _____

EMAIL - _____ CELL _____

EMAIL - _____ CELL _____

IF YOU EXPECT GUEST(S) DURING YOUR TERM OF LEASE, PLEASE STATE THEIR NAMES:

PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

NAME: _____ PHONE # _____

EMAIL: _____

IF LEASE IS BEING HANDLED THROUGH AN AGENT:

Firm Handling Lease/Agent: _____

Agent: _____ Cell Phone: _____

Email Address _____

IMPORTANT: No gate access or beach passes will be issued without prior board approval of this document. This application must be submitted to the management office for approval.

***DUES ON UNIT MUST BE CURRENT AT LEASE APPROVAL AND DURING TENANT OCCUPANCY.**

Owner Signature _____ Date: _____

I HAVE READ AND AGREE TO COMPLY WITH THE RULES AND REGULATIONS BY-LAWS FOR THE GRANDE EXCELSIOR CONDOMINIUM ASSOCIATION (OWNER IS RESPONSIBLE TO FURNISH A COPY OF ABOVE TO RENTERS)

Applicant Signature _____ Date: _____

Office use only:

The above application is: ☐ APPROVED ☐ DISAPPROVED

Dated this _____ Day of _____ 20____

For the Grande Excelsior Condominium Association

Title

VEHICLE/TRANSPONDER INFORMATION

Please complete application (please print) and submit with the following:

- 1) Attach a copy of the vehicle registration.
- 2) If renting a vehicle: Supply or attach a copy of the rental car agreement
- 3) Check payable to: Dunes of Naples POA (\$22.00 per vehicle)
- 4) When approved, transponder decals will be affixed at the security gate.

NOTE: Transponders are valid ONLY for the registered length of stay at the Dunes.

-PLEASE ALLOW 3 BUSINESS DAYS FOR PROCESSING-

TENANT NAME: _____ **BLD. & UNIT#** _____

CELL PHONE #'s _____

Vehicle # 1 – Make _____ Model _____ Year _____

Color _____ License Plate Number _____ State _____

Vehicle # 2 – Make _____ Model _____ Year _____

Color _____ License Plate Number _____ State _____

Office use only:

Transponder # _____ **Vehicle #2** _____

Valid Dates: _____ **to** _____