

**SEA GROVE CONDOMINIUM ASSOCIATION**  
**APPLICATION FOR LONG/SHORT TERM LEASE**

IN ORDER TO EXPEDITE PROCESSING, COMPLETE APPLICATION (PLEASE PRINT)  
AND SUBMIT WITH THE FOLLOWING:

- 1) **The landlord / leasing agent must submit a mandatory criminal background check with each application. (All names appearing on the rental lease as the lessee/ tenant are required to have a background check submitted.) [www.sentrylink.com](http://www.sentrylink.com)**
- 2) **Copy of signed lease between parties** – to protect the unit owner all leases should state that they are subject to Board approval.
- 3) **Check for \$150.00 payable to Sea Grove Condominium Association (Non-Refundable)**  
**-CHECKS NOT ACCEPTED FROM LESSEE-**
- 4) **Check for \$250.00 made payable to Dunes of Naples POA**
- 5) **Tenant must present a copy of the lease to guard upon arrival for access to the Dunes property.**
- 6) **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: Dunes Site Management  
Attn: Jacqui Schulz  
310 Dunes Blvd, Naples, FL 34110  
Office 239-593-8060  
Email to: [jschulz@dunesofnaples.com](mailto:jschulz@dunesofnaples.com)

**NOTE:**

**NO LEASE SHALL BE FOR LESS THAN THE ENTIRE UNIT AND SHALL BE FOR A MINIMUM OF 30 DAYS. 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) NAME (TENANT) \_\_\_\_\_

ADDRESS \_\_\_\_\_ - \_\_\_\_\_  
CITY STATE ZIP

EMAIL \_\_\_\_\_ CELL \_\_\_\_\_

EMAIL \_\_\_\_\_ CELL \_\_\_\_\_

IF YOU EXPECT GUEST 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: \_\_\_\_\_ Cell Phone \_\_\_\_\_

email: \_\_\_\_\_

**\*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 SEA GROVE CONDOMINIUM ASSOCIATION (OWNER IS RESPONSIBLE TO FURNISH A COPY OF ABOVE TO RENTERS)**

Applicant Signature \_\_\_\_\_ Date: \_\_\_\_\_

The above application is: ☐ APPROVED ☐ DISAPPROVED

Dated this \_\_\_\_\_ Day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
Sea Grove Condominium Association

**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-**

**Vehicle # 1** – Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_

Color \_\_\_\_\_ License Plate Number \_\_\_\_\_ State \_\_\_\_\_

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Color \_\_\_\_\_ License Plate Number \_\_\_\_\_ State \_\_\_\_\_

Office use only:

**Transponder #** \_\_\_\_\_ **Vehicle #2** \_\_\_\_\_

**Valid Dates:** \_\_\_\_\_ **to** \_\_\_\_\_