

**GRANDE EXCELSIOR 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.)**
- 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 \$350.00 payable to Grande Excelsior (Non-Refundable)**  
**-CHECKS NOT ACCEPTED FROM LESSEE-**  
(This fee represents \$100 application fee and a \$250 POA lease processing fee)
- 4) **Check for \$22.00 made payable to Dunes of Naples POA for each vehicle registered**  
**-CHECKS NOT ACCEPTED FROM LESSEE-**
- 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: Grande Preserve Management**  
**280 Grande Way**  
**Naples, Fl. 34110**  
**Office) 239-592-0989**

**NOTE: a) NO LEASE SHALL BE FOR LESS THAN THE ENTIRE UNIT AND SHALL BE FOR A MINIMUM OF 30 DAYS.**  
**b) 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 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: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED  Dated this _____ Day of _____ 20____  _____ For the Grande Excelsior Condominium Association
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**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: <b>Transponder #</b> _____ <b>Vehicle #2</b> _____ <b>Valid Dates:</b> _____ to _____
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