

**MALACHITE AT SAPPHIRE LAKES**

c/o Resort Management  
2685 Horseshoe Dr. South, Suite. #215  
Naples, Florida 34104  
(239) 649-5526 Fax (239) 403-1061

**RENTAL APPLICATION**

STREET ADDRESS \_\_\_\_\_ UNIT # \_\_\_\_\_  
OWNER NAME \_\_\_\_\_

*(please print or type)*

Applicant's Name \_\_\_\_\_

Spouse's Name \_\_\_\_\_

Present Address \_\_\_\_\_

Applicant's Telephone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Employer \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Employer's Telephone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

1. Auto License Number \_\_\_\_\_ Make & Color \_\_\_\_\_

2. Auto License Number \_\_\_\_\_ Make & Color \_\_\_\_\_

Occupancy From: \_\_\_\_\_ To: \_\_\_\_\_ (30 Day Minimum)

Names & Ages of Children to Occupy Apartment : \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

LEASE MAY NOT BE LESS THAN THIRTY (30) DAYS AND APPLICATION MUST BE SUBMITTED AT LEAST THIRTY (30) DAYS BEFORE LEASE TERM COMMENCES.

REFERENCES: List two (2), Local if Possible.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

IF PREVIOUSLY RENTED IN NAPLES:

Community Name: \_\_\_\_\_

Address: \_\_\_\_\_

Person to Contact (landlord/manager): \_\_\_\_\_

I CERTIFY THAT I HAVE INFORMED THE PROPOSED RENTER OF THE RULES & REGULATIONS OF MALACHITE AT SAPPHIRE LAKES.

Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_

I HAVE READ AND WILL ABIDE BY ALL RULES, REGULATIONS AND BY-LAWS OF MALACHITE AT SAPPHIRE LAKES.

Tenant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**A \$100.00 PROCESSING FEE IS REQUIRED WITH THIS APPLICATION, PAYABLE IN TWO CHECKS: \$50.00 TO RESORT MANAGEMENT AND \$50.00 TO MALACHITE AT SAPPHIRE LAKES CONDOMINIUM ASSOCIATION, INC.**

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ACTION TAKEN BY THE BOARD OF DIRECTORS:

Approved \_\_\_\_\_ Disapproved \_\_\_\_\_

Date \_\_\_\_\_

By: \_\_\_\_\_

Board Member/Manager

\_\_\_\_\_  
Office

Please Mail this Application To:

Resort Management  
2685 Horseshoe Drive South, Suite 215  
Naples, Florida 34104