

**MONTEREY MASTER OWNERS' ASSOCIATION, INC.**

c/o Dorrill Management Group  
5672 Strand Court, Suite 1  
Naples, Florida 34110  
(239) 592-9115 or Fax (239) 594-1422  
Email: alli@dmgfl.com or info@vomhoa.com

**Lease Application Check List**

Dear Prospective Owner(s),

Please submit the following for approval to purchase in Villages of Monterey:

- A complete and legible **Lease Application**, signed by prospective owner(s).
- A complete copy of the **Lease Contract** signed by both parties.
- Completed **Gate Data Form**.
- Completed and signed **Disclosure and Authorization Form** for each applicant over 18 years of age.
- **\$47.00** non-refundable processing fee for each applicant's background screening. If paying by check or money order, please make payable to: **Monterey Master Owners' Association**.
- **\$100.00** non-refundable application fee. If paying by check or money order, please make payable to: **Monterey Master Owners' Association**.

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

Realtor/Landlord: \_\_\_\_\_ Phone \_\_\_\_\_

Per Amended Docs: Section 20; Lease Term and Frequency: **6 months minimum; 1 year maximum; 2 times per calendar year**

Missing or incomplete information will result in the delay of processing your application. Complete applications **MUST** be received at least **20 days prior to move-in**.

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**Application for Approval to Lease**

I/We hereby apply for approval to lease \_\_\_\_\_ Monterey, for the period beginning \_\_\_\_\_, 20 \_\_\_\_ and ending \_\_\_\_\_, 20 \_\_\_\_.

**\*A copy of the signed sales contract must be attached.**

**PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION:**

**#1 APPLICANT INFORMATION**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
Home Address \_\_\_\_\_ Apt/Unit \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_  
Employer \_\_\_\_\_ Employer's Phone \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Driver's License # \_\_\_\_\_

**#2 APPLICANT INFORMATION:**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
Home Address \_\_\_\_\_ Apt/Unit \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_  
Employer \_\_\_\_\_ Employer's Phone \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Driver's License # \_\_\_\_\_

**OCCUPANTS:** Please list the name, relationship, and date of birth of all occupants not listed above who will be living in this unit.

Full Name	Relationship	D.O.B.
_____	_____	_____
_____	_____	_____

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**REFERENCES:** Please list **two** personal references.

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Address \_\_\_\_\_

**LAST ADDRESS OF OCCUPANCY:**

Name of current or recent landlord \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Time Period \_\_\_\_\_

**EMERGENCY CONTACT:** Please list a person to be notified in case of an emergency at the Monterey residence.

Full Name \_\_\_\_\_

Relationship \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

**VEHICLES**

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ License Plate # \_\_\_\_\_ State \_\_\_\_\_

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ License Plate # \_\_\_\_\_ State \_\_\_\_\_

**DOGS**

# of Dogs \_\_\_\_\_ Breed \_\_\_\_\_ Weight \_\_\_\_\_

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**DISCLAIMER AND SIGNATURE:** In order to facilitate consideration of this application, I/we, the applicant(s), represent that the above information is factual and correct, and agree that any falsification or misrepresentation in this application will justify its disapproval.

I/we have received, read, and understand the Declaration of Protective Covenants, Articles, Bylaws, and Rules and Regulations of Monterey Master Association, Inc. and will comply.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**APPLICATION REQUIREMENTS:** Please be aware that an incomplete application package will cause delays in processing. The following items must be included to Dorrill Management Group or the Facilities Director, Grant Giddens, to proceed:

- Completed Application
- Copy of Executed Lease Contract
- \$100.00 Non-Refundable Application Fee Payable to **Monterey Master Owners Association**
- Background Screening Authorization Form and \$47.00 (Per Occupant Over 18) Payable to **Monterey Master Owners Association**

**RETURN THE ABOVE APPLICATION TO:**

Monterey Master Owner's Association  
c/o Dorrill Management Group  
5672 Strand Court, Suite 1  
Naples, FL 34110  
(239) 592-9115 Phone

[info@vomhoa.com](mailto:info@vomhoa.com) (Grant Giddens) or  
[alli@dmgfl.com](mailto:alli@dmgfl.com) (Alli Coleman)

**APPLICATION APPROVAL:**

\_\_\_\_\_ **Approved**

**Date:** \_\_\_\_\_

\_\_\_\_\_ **Disapproved**

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

**(Board Officer, Director, or Designee)**