

**STEEPLECHASE OF NAPLES CONDOMINIUM ASSOCIATION, INC.**  
**PURCHASE APPLICATION**  
**Revised October 23, 2025**

**Return to:**

Steeplechase Condominium Association  
c/o Cambridge Property Management of Southwest Florida  
2335 Tamiami Trail, Suite 402  
Naples, FL 34103  
Phone (239) 249-7000

I (we) apply for approval to purchase Unit # \_\_\_\_\_ at Steeplechase of Naples Condominium Association and have submitted the following:

1. A signed copy of the sales contract.
2. A non-refundable check in the amount of \$100 for application fee payable to Steeplechase Condominium Association, Inc.
3. A non-refundable check in the amount of \$50 for background check per person over the age of 18 payable to Cambridge Property Management of SWFL.
4. A **completely** filled out application form (partially completed form **will not** be considered).
5. A **completely** filled out Pet Application form (included here).
6. Emergency Contact form (included here).
7. Island Eyes Background Authorization form, to be returned with your application.
8. A copy of all occupants' driver's licenses.
9. Note: See Steeplechase Declarations and Rules and Regulations at [steeplechasenaples.com](http://steeplechasenaples.com).

I (we) represent that the following information is complete and true. I (we) agree that any misrepresentation in this application will justify automatic rejection. I (we) consent to additional inquiry concerning this application, including the references below:

TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION

**PROSPECTIVE BUYER INFORMATION**

**1<sup>ST</sup> Owner Applicant Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Current Home Address:** \_\_\_\_\_

**Telephone number:** \_\_\_\_\_

**Previous Address:** \_\_\_\_\_

**Make of Car:** \_\_\_\_\_ **Year:** \_\_\_\_\_ **License No.** \_\_\_\_\_ **State:** \_\_\_\_\_

**Second Car:** \_\_\_\_\_ **Year:** \_\_\_\_\_ **License No.** \_\_\_\_\_

2<sup>nd</sup> Owner Applicant Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current Home Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Any current litigation (evictions, suits, judgments, bankruptcies, foreclosures, etc.) Yes \_\_\_ No

If yes, give details and dates \_\_\_\_\_

I am purchasing this unit with the intention to:

\_\_\_\_\_ Reside in the unit full time      \_\_\_\_\_ Reside in the unit part time  
\_\_\_\_\_ As an investment, not living in unit      \_\_\_\_\_ Part time in unit, lease other times

***Note: New owners are subject to rental restrictions. Units cannot be rented for a period of two years from date of closing, and are subject to the 10-unit limit on the number of units that can be rented at any given time.***

List the names and relationships of all persons who will occupy this unit in addition to the applicants above. Any person over the age of 18 will be required to submit a photo ID as well as submit a \$50.00 fee for processing background and/or criminal check.

NAME	RELATIONSHIP	AGE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## STEEPLECHASE DOCUMENTS

\_\_\_\_\_ I (we) have received, read, and agree to abide by the Declarations, Bylaws, Amendments, and the Rules and Regulations of Steeplechase of Naples Condominium Association. Please initial next to each paragraph below indicating you have read, understand, and agree to abide by the paragraph.

\_\_\_\_\_ **LEASE:** I (we) understand in the event that the unit is leased/rented that I will be required to submit a completely filled out lease application, with references, and fees provided accordingly, to the Steeplechase Board of Directors not less than fourteen (14) days prior to the rental taking place. I understand that leases are for a minimum of 90 days and a maximum of twice yearly. I understand that renters and guests are not permitted to have ANY pets or trucks when renting the unit. Lanais and patios are to be kept free of clutter, and nothing is to be affixed to the outside of the building.

\_\_\_\_\_ **VIOLATIONS:** I (we) agree that in the absence of the owners, the Association is granted full power to take whatever action is necessary, including eviction, to prevent or stop violations by lessees and their guests.

\_\_\_\_\_ **VEHICLES:** I (we) understand motorcycles, boats, motor homes, recreational vehicles, trailers, campers, mopeds, conversion vans, and the like, and any vehicles not in operable condition, too large to park in the garage with the garage door fully closed, or not validly licensed, are not permitted to be kept on the condominium property. See Declarations 12.7 and Rules and Regulations 10.4 and 10.5 regarding unit owners' truck guidelines.

\_\_\_\_\_ **IMPROVEMENTS:** I (we) understand that any repairs or improvements made to my unit requires completion of a REQUEST TO MODIFY CONDOMINIUM PROPERTY form found on the Steeplechase website and approval by the Board of Directors BEFORE any work has begun.

\_\_\_\_\_ **GUESTS:** I (we) understand that occupancy of my unit in my absence is limited, and other than when the guest is immediate family, must be approved after submission of a Guest Occupancy in Absence of Owner form found on the Steeplechase website. The application must be submitted to the Board a minimum of two weeks prior to the guest arrival. No guest may bring pets to Steeplechase. See Rules and Regulations 10.7 regarding guests' truck guidelines.

\_\_\_\_\_ **WATER SHUT OFF:** I (we) understand when I (we) leave the unit for more than 48 hours, I (we) must lock the water main with a standard lock provided by Steeplechase. Also, the water heater breaker in the electric panel must be shut off when leaving for 48 hours or more.

\_\_\_\_\_ **GRILLING:** I (we) understand that per Collier County fire code regulations gas and charcoal grills are not permitted within 10 ft of any building and are limited to small propane cylinders (2.7 lbs.).

\_\_\_\_\_ **TRASH:** I (we) understand that trash must be placed IN the dumpster in bags. Major items like furniture are not permitted. No trash is permitted in recycling bins or left outside the dumpster.

\_\_\_\_\_ **BEHAVIOR:** I (we) understand that Steeplechase Rules and Regulations provide that I (we) are not to engage in activity that may be a “nuisance” to our neighbors or “interfere” with their rights to enjoy Steeplechase property including their lanai.

\_\_\_\_\_ I (we) understand that the Association or its manager may use the above application to perform background, prior landlord, credit, and police records checks on the applicant(s) listed above. This information will be kept confidential and may be used to approve or disapprove the applicant(s). The prospective purchaser(s) will be advised by Association Management whether this application is approved within a 21-day period from the date of receipt of this completed application, fee, reference letters and a copy of the sales contract.

**I (we) have read, understand, and agree to the statements above.**

First Owner Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Second Owner Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return your completed application and supporting documents to:

Steeplechase Condominium Association  
c/o Cambridge Property Management of Southwest Florida  
2335 Tamiami Trail, Suite 402  
Naples, FL 34103  
Phone (239) 249-7000

Upon review of all submitted documentation concerning the purchase of this property, the Steeplechase Condominium Association takes the following action:

**ASSOCIATION APPROVED** \_\_\_\_\_ **DISAPPROVED** \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\*

## STEEPLECHASE OF NAPLES CONDOMINIUM ASSOCIATION

### PET APPLICATION

Each unit may have one dog or one cat not to exceed 25 pounds in weight. Guests and tenants **may not** have pets of any kind.

Applicant's name (printed) \_\_\_\_\_ Unit \_\_\_\_\_

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Phone number

Type of pet \_\_\_\_\_ Weight at present \_\_\_\_\_

Breed \_\_\_\_\_ Weight when full grown \_\_\_\_\_

Check the categories below:

\_\_\_\_\_ Copy of the pet's immunization record is attached. (required)

\_\_\_\_\_ Color photo of the pet is attached. (required)

\_\_\_\_\_ Pet Microchip number \_\_\_\_\_

\_\_\_\_\_ I understand that falsification of information or failure to register my pet will result in revocation or denial of approval by the Board.

\_\_\_\_\_ I further understand that I am fully responsible for the action of my pet and have read the Rules and Regulations regarding the control of my pet.

\_\_\_\_\_ I understand that this pet approval is only for this pet and expires when the pet is no longer on this property.

APPLICANT'S SIGNATURE: \_\_\_\_\_

Date submitted: \_\_\_\_\_

## STEEPLECHASE OF NAPLES CONDOMINIUM ASSOCIATION

### Emergency Contact Form

In an effort to maintain security and safety for all our residents, the Steeplechase Board of Directors strongly encourages you to fill in the information requested below. This is to facilitate communication between the Association and the next of kin if our residents should experience a medical emergency or other emergency that may arise if caused by accident or weather.

Your information will be kept confidential and not publicized. Only the Steeplechase Board of Directors and Cambridge Property Management of Southwest Florida will be in possession of this information.

#### **Please Print**

Steeplechase Resident name (s) \_\_\_\_\_

UNIT: \_\_\_\_\_ Pet Type: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ 2<sup>nd</sup> CELL PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ 2<sup>nd</sup> EMAIL: \_\_\_\_\_

Person in Possession of Emergency key: \_\_\_\_\_

Home Watch Name and Number: \_\_\_\_\_

Alternate (seasonal) Address: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

EMERGENCY CONTACT: (other than person residing with you)

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

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

**Thank you for your cooperation.**

SIGNATURE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

## **RADON MITIGATION**

In the case of a proposed sale, if an inspection (as required in NABOR 4/1/2012 Standard D.2) reveals that presence of RADON gas exists at or above EPA action levels (4.0 picocuries per liter of air) the Steeplechase Board of Directors must approve any remedial action agreed to by the BUYER and the SELLER prior to remedial action commencing, including any intended change to common elements.

If any remedial action results in modifications to the unit or common elements, the SELLER and the BUYER shall be financially responsible.

Evidence of a Collier County Building Permit for the remedial action also must be presented to the Board.

The business or person(s) who perform RADON gas remediation must be certified by the Florida Department of Health, as required in Florida Statutes, Title XXIX, Chapter 404.056 (2).

## **BOARD APPROVAL**

**If proper notice and documentation are not given to the Board, the Board at its election may approve or disapprove of the sale.** Any sale entered into without Board approval may, at the option of the Board, be treated as not valid, and the Board shall have the power to void the sale unless subsequently approved by the Board once any violations of these RADON requirements have been remedied.