



1778 Samurai Point Q-1 Lutz, FL 33558  
813-948-6411  
www.PLCA.rocks



## Application for Sale, 30+ Day Lease, & Transfer of Units

Thank you for your interest in PLCA! PLCA Board Approval is required PRIOR to residency.

The application turnaround time is 10 business days. There is a \$100 charge for a 3-day RUSH turnaround.

1). Application for residency package.

Complete and sign all forms.

Copies of Driver's Licenses for ALL residents.

For single/unmarried residents, there is a \$150 application fee per person.

For married residents, there is a \$150 application fee.

For trusts, corporations, companies, and LLCs, there is a \$150 application fee.

Owners are allowed 2 pets, renters are allowed 1 pet.

Please fill out a pet application form for each pet, with copies of their current vaccinations.

There is a \$25 fee (per pet).

**All fees should be paid with either a check or money order, made payable to PLCA.**

**Cash and credit cards are not accepted.**

2). Background authorization.

Please fill out and sign the attached Background Investigation Authorization Form.

3). Orientation Meeting with PLCA Board Member. To schedule, please call:

Traci Kanaan 941-228-0230

Scott Trueira 813-944-7064

Mike Fitzsimmons 970-689-6372

Bill Freel 813-506-2064

Ninalynn Saindon 719-648-0591

4). Completed AANR application for individual new membership or proof of active AANR or proof of other active social nudist membership. If you are not a member of a nudist/naturist organization, fill out the attached AANR/ NAPL membership form. There is a \$46.50 per person membership fee to join, via check made out to NAPL.

If you have any questions, please call the PLCA Condo Office.

Thank you!

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## Application for Sale, 30+ Day Lease, & Transfer of Units (1/6)

Please print legibly or type all information. "N/A" in blanks, which are not applicable. Questions left blank may cause this application to be returned "un-approved," and/or your stay will be canceled. Please attach a copy of your driver's license or government issued photo ID. A NON-REFUNDABLE administration fee of \$150 is charged per application (per married couple or per single) for applicant screening and investigations, prior to lease or purchase. OCCUPANCY BEFORE APPROVAL BY THE BOARD OF DIRECTORS IS NOT PERMITTED. The PLCA Board of Directors will respond as quickly as possible, but not more than thirty (30) days from the date that a complete application is submitted and accepted.

Date: \_\_\_\_\_ PLCA Unit/Lot: \_\_\_\_\_  
Lease: \_\_\_\_ Purchase: \_\_\_\_ Intended Date of Occupancy: \_\_\_\_\_

### Applicant #1 Information

Applicant #1 First / Last Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_ Street Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State / Province: \_\_\_\_\_ Postal / Zip Code: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Email: \_\_\_\_\_  
Driver License #: \_\_\_\_\_ State: \_\_\_\_\_ Address: \_\_\_\_\_  
Vehicles Make: \_\_\_\_\_ Color: \_\_\_\_\_ License Plate: \_\_\_\_\_  
Is your vehicle a commercial vehicle? Yes: \_\_\_\_ No: \_\_\_\_ Have you been to Paradise Lakes Before? Yes: \_\_\_\_ No: \_\_\_\_  
What other Nudist clubs or organizations have you been affiliated with?: \_\_\_\_\_  
Are you a service member as defined in Florida Statute 250.01? Yes: \_\_\_\_ No: \_\_\_\_  
Have you ever been arrested? Yes: \_\_\_\_ No: \_\_\_\_ If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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## Application for Sale, 30+ Day Lease, & Transfer of Units (2/6)

### Applicant #2 Information

Applicant #2 First / Last Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_ Street Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State / Province: \_\_\_\_\_ Postal / Zip Code: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Email: \_\_\_\_\_  
Driver License #: \_\_\_\_\_ State: \_\_\_\_\_ Address: \_\_\_\_\_  
Vehicle: Make: \_\_\_\_\_ Color: \_\_\_\_\_ License Plate: \_\_\_\_\_  
Is your vehicle a commercial vehicle? Yes: \_\_\_ No: \_\_\_ Have you been to Paradise Lakes Before? Yes: \_\_\_ No: \_\_\_  
What other Nudist clubs or organizations have you been affiliated with?: \_\_\_\_\_  
Are you a service member as defined in Florida Statute 250.01? Yes: \_\_\_ No: \_\_\_  
Have you ever been arrested? Yes: \_\_\_ No: \_\_\_ If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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### Other Occupants

(Names, Ages, Relationship):

First / Last Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_  
First / Last Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

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### Pets / Service Animals

PLCA allows Renters to have 1 pet, and Owners to have 2 pets, with a \$25 per pet processing fee. Service animals allowed by law. All pets and service animals must have updated shots and rabies vaccinations. There is an additional registration form for pet and service animals. See [www.PLCA.ocks](http://www.PLCA.ocks) for details.

Pet #1: Dog: \_\_\_ Cat: \_\_\_ Other: \_\_\_\_\_ Breed: \_\_\_\_\_ Service? YES: \_\_\_ No: \_\_\_  
Pet #2: Dog: \_\_\_ Cat: \_\_\_ Other: \_\_\_\_\_ Breed: \_\_\_\_\_ Service? YES: \_\_\_ No: \_\_\_  
Pet #3: Dog: \_\_\_ Cat: \_\_\_ Other: \_\_\_\_\_ Breed: \_\_\_\_\_ Service? YES: \_\_\_ No: \_\_\_

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## Application for Sale, 30+ Day Lease, & Transfer of Units (3/6)

### Work From Home

Do you or anyone in your household intend to operate a business from the unit, or work from home?

Yes\_\_\_ No\_\_\_ If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

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### Character References

List three, non-related acquaintances of more than one year. At least one of these references should be a nudist. These references will be checked.

#1 First / Last Name: \_\_\_\_\_

City: \_\_\_\_\_ State / Province: \_\_\_\_\_ Years Acquainted: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

May we identify PLCA as the Caller? Yes\_\_\_ No\_\_\_

#2 First / Last Name: \_\_\_\_\_

City: \_\_\_\_\_ State / Province: \_\_\_\_\_ Years Acquainted: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

May we identify PLCA as the Caller? Yes\_\_\_ No\_\_\_

#3 First / Last Name: \_\_\_\_\_

City: \_\_\_\_\_ State / Province: \_\_\_\_\_ Years Acquainted: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

May we identify PLCA as the Caller? Yes\_\_\_ No\_\_\_

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## Application for Sale, 30+ Day Lease, & Transfer of Units (4/6)

### Emergency Contact Information

First / Last Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Street Address: \_\_\_\_\_ Street Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State / Province: \_\_\_\_\_ Postal / Zip Code: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

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### If PURCHASING, Complete This Section

Expected Date of Closing: \_\_\_\_\_  
Realtor (If not owner): \_\_\_\_\_ Phone: \_\_\_\_\_  
Title Company / Attorney Handling Closing: \_\_\_\_\_  
Street Address: \_\_\_\_\_ Street Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State / Province: \_\_\_\_\_ Postal / Zip Code: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Email: \_\_\_\_\_  
Purchase Price: \_\_\_\_\_ Down Payment: \_\_\_\_\_  
Name(s) of prospective purchaser (as it will appear on title):  
(1) \_\_\_\_\_ (2) \_\_\_\_\_

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## Application for Sale, 30+ Day Lease, & Transfer of Units (5/6)

### If LEASING, Complete This Section

Date of Occupancy: \_\_\_\_\_

Agent (If not Owner) Handling Lease: \_\_\_\_\_

Street Address: \_\_\_\_\_ Street Address Line 2: \_\_\_\_\_

City: \_\_\_\_\_ State / Province: \_\_\_\_\_ Postal / Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Name(s) of prospective lessee (as it will appear on lease):

(1) \_\_\_\_\_ (2) \_\_\_\_\_

Term of Lease: \_\_\_\_\_ Months From: \_\_\_\_\_ To: \_\_\_\_\_

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### Application is made for approval of the Purchase/Lease of the Subject Condominium Unit

From (Name of Owners): \_\_\_\_\_

Owner's Mailing Address: \_\_\_\_\_ Street Address Line 2: \_\_\_\_\_

City: \_\_\_\_\_ State / Province: \_\_\_\_\_ Postal / Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

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## Application for Sale, 30+ Day Lease, & Transfer of Units (6/6)

I understand that the acceptance of the Purchase/Lease of a lot or unit at Paradise Lakes Condominium Association is conditioned upon the truth and accuracy of this application and upon the approval of the Board of Directors. Any false or misleading statements set forth on this form will result in the automatic rejection of this application. \_\_\_\_\_ (Applicant #1 initials) \_\_\_\_\_ (Applicant #2 initials)

I further understand that the Paradise Lakes Condominium Association or their agent(s) may investigate the information supplied and full disclosure of pertinent facts may be made to the Board of Directors and the unit owner. I specifically authorize such investigation and agree that the Board of Directors and Paradise Lakes Condominium Association itself shall be held harmless from any action or claim by me in connection with the use of the information contained herein. \_\_\_\_\_ (Applicant #1 initials) \_\_\_\_\_ (Applicant #2 initials)

I fully understand this is a nudist development, and that I and my household members will practice social nudism. I acknowledge that I have received the rules and regulation of the Paradise Lakes Condominium Association and I further agree to abide by all rules, regulations and by-laws which have been or may be adopted by the Paradise Lakes Condominium Association. \_\_\_\_\_ (Applicant #1 initials) \_\_\_\_\_ (Applicant #2 initials)

In making the foregoing application, I am aware that the decision of the Paradise Lakes Condominium Association will be final and no reason need be given for any action of the Board of Directors. I agree to be governed by the determination of the Paradise Lakes Condominium Association Board of Directors. \_\_\_\_\_ (Applicant #1 initials) \_\_\_\_\_ (Applicant #2 initials)

The information in this application is true, I agree to all of the terms stated above.

Applicant #1 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant #2 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Revised October 2023

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