



Re-Sale Application

Esplanade Homeowner (Seller) Information:

Last Name(s) _____

First Name(s) _____

Member Number _____

Mailing Address _____ City _____ State _____ Zip Code _____

Primary Phone # (s) _____ Email _____

Anticipated Closing Date _____ Will Seller be renting back? **Yes or No**

Seller owns or will be buying another property in community? **Yes or No**

Purchaser (New Owner) Information:

Owner #1 First & Last Name _____

Owner #2 First & Last Name _____

Esplanade **Purchase** Address _____

I am a current Esplanade Member Yes No

Owners **Current/Alternate** Address _____

Owner #1 Primary Phone # _____ Cell # _____ Email _____

Owner #2 Primary Phone # _____ Cell # _____ Email _____

Auto #1 Make _____ Color _____ Yr _____ Lic # _____ State _____

Auto #2 Make _____ Color _____ Yr _____ Lic # _____ State _____

Auto #3 Make _____ Color _____ Yr _____ Lic # _____ State _____

Name of Real Estate Company and Agent _____

Email of Real Estate Agent Email _____ Phone _____



THE UNDERSIGNED HEREBY REPRESENTS THAT ALL THE FOLLOWING INFORMATION IS TRUE AND CORRECT HEREIN. PLEASE LIST OCCUPANTS INCLUDING CHILDREN:

Name _____ Relationship _____ Age _____ Full or Part Time

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Name _____ Relationship _____ Age _____ Full or Part Time

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DOMESTIC PETS ARE PERMITTED IN ACCORDANCE WITH GOVERNING DOCUMENTS

Please check here if No Pets

Type of Pet (Breed) _____ Pet Name _____ Lic # _____
State _____ Exp Date _____ Weight of Pet _____ Rabies Vaccination Date _____

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FEES DUE TO THE ASSOCIATION

Any contract signed on or after February 15, 2026, will follow the 2026 Capital Contribution amount set at Fifteen Thousand Dollars (\$15,000).

Capital Contribution is payable at closing and will be noted in your estoppel.

Estoppel requests should be emailed to management@naplesesplanadegcc.com.



This form has been designed for the purpose of protecting you and the current property owners. It is the desire of the present owners of the Association to welcome you to an environment in which pride in ownership and adherence to all Rules will ensure an ideal private community life.

Your signature will acknowledge your agreement to comply with the community guidelines as stated in the Declaration of Covenants, Conditions and Use Restrictions.

Signature of Purchaser _____ Date _____

Signature of Purchaser _____ Date _____

Signature of Homeowner or Real Estate Agent _____ Date _____

Please return application at least 2 weeks prior to closing to:

Esplanade Golf & Country Club

Attn: HOA

8906 Torre Vista Lane, Naples, FL 34119

or via e-mail management@naplesesplanadegcc.com