

TENANT/GUEST REGISTRATION FORM FOR CONNESTEE FALLS

To: Connetsee Falls Property Owners Association, Inc., 33 Connetsee Trail, Brevard, NC 28712,
828-885-2001, 828-862-5830 (fax)

Ref.: Unit: _____, Lot: _____ Street Address: _____ Phone# _____

Tenant/Guest Period: Beginning _____ and terminating _____
Month/Day/Year Month/Day/Year

I/We hereby notify CFPOA of the rental/use of the above-mentioned property. I agree to abide by the conditions listed herein. I understand that I am responsible for tenant's/guest's compliance with the Declaration, By-Laws, and the rules and regulations of the Connetsee Falls Property Owners Association (CFPOA) and that it is my responsibility to provide tenants/guests with a copy of these documents and to inform them that they are subject to and are obligated to observe these provisions. **I hereby authorize the CFPOA to allow the tenants/guests (identified below) and his/her family be allowed to use the facilities and various amenities of the Association upon payment of such fees as shall be determined by the Board of Directors. I further understand that all assessments, fees and other charges must be kept current in order to continue use of the facilities and amenities and that I am responsible for any unpaid assessments and/or penalties levied against tenants/guests of my property.**

Signature(s) of Owner(s) _____ Date _____
Or Authorized Agent _____ Date _____

WHO WILL OCCUPY RESIDENCE?

	Name	Relationship *(H, W, S, D, O)	Age (if child)
Occupant #1			
Occupant #2			
Occupant #3			
Occupant #4			

(*Please Indicate "H"-Husband, "W"-Wife, "S"-Son, "D"-Daughter, "O"-Other. Include children's ages.)

TENANT/GUEST'S PERMANENT ADDRESS AND TELEPHONE NUMBER:

Address: _____

Phone Number: _____ E-Mail Address: _____

VEHICLES OWNED BY TENANTS/GUESTS AND OCCUPANTS:

	Year	Make	Model	Color	Tag#(Include State)
Vehicle #1					
Vehicle #2					
Vehicle #3					

I (We) the tenant's/guest's of the above property agree that all CFPOA Rules, Regulations and Restrictive Covenants will be strictly observed by all occupants of said property. I (We) further agree to vacate Connetsee Falls within forty-five days after notice from the Connetsee Falls Property Owners Association, Inc. of any violations of the aforesaid Rules, Regulations, and Covenants. I (We) must pay for use of amenities with cash or Master Card and Visa credit cards.

Date _____ Tenant's/Guest's Signature _____ Driver's License # (Include State) _____

-For Administration Office Use Only-

Tenant/Guest Fees: Amount \$ _____ Date Paid: _____ By: _____

Copies to: P.O/Agent, Tenants/Guests, CFPOA Tenant/Guest File, Security