

**TOWAMENSING TRAILS PROPERTY
OWNERS ASSOCIATION RENTAL
REGISTRATION FORM**

PART TIME RENTAL

NAME OF PROPERTY OWNER (PLEASE PRINT): _____

LOCATION OF RENTAL:

ACCT / LOT # _____ 911 # **6318315891** STREET: _____

I HEREBY AUTHORIZE TTPOA TO RELEASE EIGHT(8) RENTER WRISTBANDS _____ (PROPERTY OWNER/AGENT MUST INITIAL)
ONLY 8 WRISTBANDS WILL BE ISSUED (NO EXCEPTIONS).

WHO WILL BE PICKING UP RENTAL PACKET (NAME & PHONE NUMBER):

FOR QUESTIONS OR COMPLAINTS PLEASE CONTACT: _____

I AFFIRM I HAVE READ THE CURRENT RULES OF CONDUCT AND UNDERSTAND THAT RENTERS CANNOT PICK-UP PACKETS (NO EXCEPTIONS) ALSO THAT TTPOA DOES NOT ALLOW RENTERS TO REGISTER THEIR OWN ATV'S, GOLF CARTS, BOATS, ETC.

SIGNATURE OF PROPERTY OWNER/AGENT _____ DATE _____

DURATION OF STAY: FROM: _____ TO: _____

RENTER NAME (PLEASE PRINT): _____

RENTER MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

(PHONE): _____ (ALT): _____

I AFFIRM I HAVE READ THE CURRENT COMMUNITY RULES (SEE REVERSE)

SIGNATURE OF RENTER: _____

ALL LICENSE PLATES STAYING AT THE ABOVE MENTIONED PROPERTY:

STATE: _____ PLATE # _____

STATE: _____ PLATE # _____

STATE: _____ PLATE # _____

STATE: _____ PLATE # _____

STATE: _____ PLATE # _____

STATE: _____ PLATE # _____

STATE: _____ PLATE # _____

STATE: _____ PLATE # _____

OFFICE USE ONLY:

WRISTBAND #S: _____

INITIALS: _____