

**ESTIMATED TIME OF ARRIVAL:** 4:00pm

Tenant/Guest Registration Number \_\_\_\_\_

**TENANT/GUEST REGISTRATION FORM FOR CONNESTEE FALLS**

To: Conneestee Falls Property Owners Association, Inc., 33 Conneestee Trail, Brevard, NC 28712, 828-885-2001

Unit: \_\_, Lot: \_\_ Street Address: \_\_\_\_\_ House Name: \_\_\_\_\_

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 Conneestee 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 Jason Diamond, Master Diamond Properties, Inc. Date \_\_\_\_\_

**WHO WILL OCCUPY RESIDENCE?**

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

(\*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)
<b>Vehicle #1</b>					
<b>Vehicle #2</b>					
<b>Vehicle #3</b>					

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 Conneestee Falls within forty-five days after notice from the Conneestee 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

**COMPLETE & EMAIL TO: INFO@MASTERDIAMONDNC.COM OR FAX TO 954.949.9035**

**WE MUST HAVE THIS BACK 10 DAYS BEFORE YOUR CHECK IN DATE**