

**TRAILER ESTATES PARK AND RECREATION DISTRICT
AGREEMENT OF RESPONSIBILITY RENTER RESIDENT PP 28**

OWNER NAME: _____

PROPERTY ADDRESS: _____

RENTER(S) NAME(S): _____

DURATION OF LEASE, FROM _____ TO _____

I AM THE OWNER (OR AGENT) OF THE ABOVE PROPERTY IN TRAILER ESTATES. I ACCEPT THE RESPONSIBILITY AND ACCOUNTABILITY BOTH FOR THE COMPLIANCE OF ALL RULES AND REGULATIONS GOVERNING THE USE OF TRAILER ESTATES COMMON FACILITIES AND THE FISCAL RESPONSIBILITY FOR ANY DAMAGE THAT THE ABOVE NAMED PERSON(S) AND THEIR GUESTS MAY CAUSE. **I ALSO UNDERSTAND THAT I MAY NOT GIVE, LEND OR SELL A FOB-ID TO SAID COMMON FACILITIES TO ANY RENTER.**

OWNERS' SIGNATURE: _____ **DATE:** _____

(SIGNATURE MUST BE NOTARIZED IF NOT SIGNED IN TRAILER ESTATES OFFICE)

THE ABOVE TO BE COMPLETED BY OWNER.

STATE OF _____

COUNTY OF _____

SWORN TO (OR AFFIRMED) AND SUBSCRIBED before me by means of physical presence or online

Notarization, this ____ day of _____, 2024 by _____, who is personally known to me or produced _____ as identification.

NOTARY PUBLIC SIGNATURE

STATE OF _____

BELOW TO BE SIGNED BY RENTER RESIDENT:

I UNDERSTAND AND AGREE TO PAY AN **ANNUAL REGISTRATION FEE OF \$50.00** FOR THE ABOVE ADDRESS. **ADDITIONALLY, FOR A NON-REFUNDABLE FEE OF \$50.00 PER FOB-ID,** ONE (1) FOB-ID WILL BE ISSUED AND AN ADDITIONAL FOB-ID MAY BE ISSUED, IF NEEDED, FOR AN ADDITIONAL RENTER THAT IS LISTED ON THE AGREEMENT OF RESPONSIBILITY RENTER RESIDENT FORM. A MAXIMUM OF TWO (2) FOB-IDS WILL BE ISSUED TO A PROPERTY ADDRESS. I MUST PAY A FEE OF \$50.00 FOR EACH FACILITY FOB-ID, WHICH IS NOT REFUNDABLE. IF A FOB-ID IS LOST DURING THE RENTAL PERIOD, A NEW FOB-ID MAY BE PURCHASED FOR \$50. I AGREE TO ALL THE PROVISIONS OF THIS LEASE AGREEMENT.

IF YOU ARE A RETURNING RENTER AND YOU HAVE YOUR PURCHASED FOB-ID, YOU MAY REACTIVATE IT FOR \$25 PER RENTAL PERIOD, NOT TO EXCEED ONE (1) YEAR OR LESS THAN 30 DAYS..

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RENTER RESIDENT

SIGNATURE: _____ DATE: _____

SIGNATURE: _____ DATE: _____

POST OFFICE BOX NUMBER: _____ PHONE NUMBER(S) _____

ADDITIONAL DOCUMENTS ARE REQUIRED TO OBTAIN FOB-ID AND/OR RESIDENT RENTER CARD

EMERGENCY CONTACT PERSON:

NAME: _____

PHONE NUMBER (S): _____