India		Im Association, Inc
This Form is to be used for all she	Short Term Rental	an 3 months) that are staying at the Indian Cove
	Condominium Asso	
Арр	lication Fee of: \$50.00	-
••	::	
		, between Indian Cove Condominium Association, Inc ("Tenant").
	ADDITIONAL OC	CUPANTS
(if additional occupants a	re over 18 years of age, provid	de all information as requested for application)
Name:		Age:
Name:		
Name:		Age:
Name:		
Telephone No.:		
Arrival:		Departure:
GUEST FORMS MUST BE COMPLE	OCCUPAN	D MC HOMES REALTY AT LEAST 5 DAYS PRIOR TO ICY.
INITIAL BELOW:		
I understand the Governing Doc	uments state: NO PFT	SALLOWED
		by only those listed on the application
		of the Indian Cove Condominium Association, Inc
	Emergency Co	ontact:
Name:	Relation	nship:
Phone:	Email: _	
Renter Signature		Date:
Renter Signature		Date:
-		
Approved:		Disapproved:
Board Member Signature		Date
	-	blic website <u>https://indiancove.hoamch.com</u> . Go to
	-	Documents.