

GUEST REGISTRATION FORM

PAR ONE HOMEOWNERS ASSOCIATION
(A 55 PLUS COMMUNITY)
4140 27 Ct SW
Naples, Florida 34116

(FAX - 239-455-2931)
(PHONE-239-455-4740)

APPLICATIONS MUST BE SUBMITTED FIFTEEN DAYS (15) DAYS IN ADVANCE

NOTE: ANY GUESTS STAYING OVER 21 DAYS WILL INCUR A \$150.00 USE FEE.

NAME OF OWNER _____ DURING MY/OUR ABSENCE, THE FOLLOWING
INDIVIDUALS ARE AUTHORIZED TO OCCUPY: PAR _____ UNIT NO. _____ IN BUILDING NO. _____

NAME OF GUEST: _____ RELATIONSHIP TO OWNER _____

PERMANENT ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: HOME: _____ CELL: _____

ARRIVAL DATE: _____ DEPARTURE DATE: _____

LIST ANY OTHER PROPOSED GUESTS:

NAME: _____ NAME: _____

NAME: _____ NAME: _____

IN THE EVENT OF AN EMERGENCY, PLEASE NOTIFY:

NAME _____ RELATIONSHIP: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____ CELL: _____

IF GUESTS HAS VEHICLE PARKED ON PROPERTY, PLEASE COMPLETE BELOW INFORMATION:

MAKE: _____ YEAR: _____ LICENSE NO. _____ STATE: _____

GUESTS/VISITORS ARE NOT ALLOWED TO HAVE ANY PETS WITH THEM WHILE OCCUPYING UNIT. MY/OUR GUESTS OR VISITOR WILL NOTIFY POHA OFFICE (AT CLUBHOUSE) IMMEDIATELY UPON ARRIVAL AND WILL FURNISH A COPY OF THE SIGNED GUEST FORM (FOR MORE EFFICIENT CHECK IN). GUESTS WILL NOT BE ALLOWED TO UTILIZE FACILITIES, OR GIVEN POOL PASSES/CAR DECAL WITHOUT PRIOR NOTIFICATION FROM OWNER IN WRITING.

FOR OWNERS: WE/I AFFIRM THIS OCCUPANCY IS IN ACCORDANCE WITH THE RESTATED DECLARATION OF CONDOMINIUM FOR OUR ASSOCIATION AND THAT OUR GUESTS/VISITORS WILL OBSERVE THE BY-LAWS AND OTHER APPLICABLE RULES AND REGULATIONS OF PAR ONE HOMEOWNERS ASSOCIATION.

DEFINITION OF GUEST: A GUEST OR VISITOR IS CONSIDERED TO BE ANY PERSON, INCLUDING RELATIVES OR FRIENDS, OCCUPYING A UNIT OWNED BY ANOTHER WHEN NO FINANCIAL/BARTERING CONSIDERATION IS INVOLVED. OWNERS MISREPRESENTING THE STATUS OF THEIR UNIT'S OCCUPANCIES (I.E. GUEST RATHER THAN RENTER) WILL BE SUBJECT TO FINES/LOSS OF THE USE OF RECREATIONAL FACILITIES BY SAID OCCUPANTS.

AT NO TIME SHALL ANY ONE BEDROOM UNIT HAVE MORE THAN TWO (2) ADULT OCCUPANTS, NOR DO ANY TWO BEDROOM UNITS HAVE MORE THAN FOUR (4) ADULT OCCUPANTS.

DATE: _____ OWNERS SIGNATURE: _____

PARONE HOMEOWNERS ASSOCIATION BOARD OF DIRECTORS