

Ocean Beach



Surf Club

OCEAN BEACH UNIT #1
P.O. BOX 213
LAVALLETT, NJ 08735
732-830-8100

GUEST/ RENTAL APPLICATION

Summer Season

This application is to be completed and submitted by the homeowner renting their property. It must be submitted to the trustees (by email or parcel post) no later than 14 days before the renter occupies the property. This application is required for every change of renters. The purpose of the application is to facilitate locating and identifying anyone in case of emergency, economically ordering the correct quantity of renter's badges for the season and maintaining a safe neighborhood especially in the less populated winter months.

Rental Year _____

Rental Address: _____

No. Bedrooms _____

Homeowner's Name: _____

Contact Phone: _____ email: _____

Summer Rental

Name of Agency/ By owner: _____

Number of Week(s) & Dates Being Rented: _____

Name of Primary Guest/Renter: _____

Number of Week(s) & Dates Being Rented: _____

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Name of Primary Guest/Renter: _____

Number of Week(s) & Dates Being Rented: _____

Name of Primary Guest/Renter: _____

Number of Week(s) & Dates Being Rented: _____

Name of Primary Guest/Renter: _____

Signing this application you acknowledge you have read and agree to abide by OBSC1 Rules & Regulations noting Rules 6,7 & 8 that pertain directly to the homeowners responsibility when renting.. You acknowledge as the homeowner you are responsible for the acts of your guests/renters therefore if using a rental agency it is your responsibility that the agency complies with the Rules and Regulations.

Signed: _____

Date: _____

Printed: _____