

## Trailer Storage Agreement Trailer parking is available to UNIT OWNERS ONLY.

## **RENTAL RATE**

- 1. \$100 per year
- 2. \$25 per week
- 3. No Proration
- 4. No Refunds

## **RULES AND REGULATIONS**

- 1. Landlord is not responsible for the security of any items stored in the Trailer Storage Area.
- 2. Renter must be an owner in good standing.
- 3. Each contract must contain all appropriate information regarding the items to be stored.
- 4. Each item must have a current, valid parking sticker, affixed to the item.
- 5. Each contracted item will be photographed for documentation at the time a contract is issued.
- 6. A contract will be required for each axled item, no exceptions. Owners are not allowed to "stack" axled items on top of each other unless each item has a current, paid contract.

**ACCESS TO PREMISES:** Tenant may obtain access by entering their assigned access code.

## LANDLORD:

Indian Pointe Condominium Association 840 Mace Road Osage Beach, MO 65065

**TENANT:** All tenant information below, and all item description information required, must be completed in its entirety for this lease to be considered executed.

| NAME:                    |                  | <b>—</b> |
|--------------------------|------------------|----------|
| MAILING ADDRESS:         |                  |          |
| CITY/ST/ZIP:             |                  |          |
| HOME PHONE:              |                  |          |
| CELL PHONE:              |                  |          |
| EMAIL:                   |                  |          |
| UNIT NUMBER:             |                  |          |
| DESCRIPTON OF ITEM (MAKE | E/MODEL/LENGTH): |          |
| SERIAL NUMBER:           |                  |          |
| NUMBER OF AXELS:         |                  |          |
| LICENSE #:               |                  |          |
|                          |                  |          |
| Landlord:                | Tenant:          |          |
| Date:                    | Date:            |          |
|                          |                  | •        |
|                          |                  |          |
| For Office Use Only:     |                  |          |
| Date Paid:               |                  |          |
| Check Amount:            |                  |          |
| Received by:             |                  |          |