

**TEMPORARY
CARPORT/SPACE RENTAL FORM**

A. INFORMATION OF CARPORT/STORAGE SPACE BEING RENTED

Resident's Name: _____ Telephone: _____

Mutual/Apt No.: _____ Cell Phone: _____

Carport to be Rented: Carport Bdg. _____ Space: _____

B. INFORMATION OF PERSON RENTING CARPORT/STORAGE SPACE

Resident's Name: _____ Telephone: _____

Mutual/Apt No.: _____ Cell Phone: _____

I, the renter of the above carport shown carport in Section A will be renting the
Parking space only Storage space only Space & Storage

Vehicle Make: _____ *Insurance Company _____

Vehicle Color: _____ *LW Decal Number: _____

Vehicle License: _____ *▲ above are required fields

It is understood and agreed to by the parties involved that the renter/user of the above carport/storage accepts responsibility for any repairs needed to the carport due to negligence or misuse during the rental/use of said carport space or . Be it also agreed that said vehicle will be moved out of the carport on scheduled carport cleaning days.

It is further acknowledged and agreed that this is a temporary rental/use of a carport space/storage and either party can withdraw from this agreement at any time. THE MUTUAL CORPORATION RETAINS, AT ALL TIME, THE AUTHORITY TO REVOKE AND CANCEL THIS TEMPORARY CARPORT RENTAL/USE, AT ITS DISCRETION.

Signature of Resident Who Owns Carport Date: _____

Signature of Resident Renting/Using the Carport Date: _____

DIRECTOR'S APPROVAL

Signature of Mutual Director Date: _____