

# Salt Springs Resort Association, Inc.

P.O. Box 5056

Salt Springs, Florida 32134

Phone: 352-685-4003 Fax: 352-685-2163

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## Information Form (may be sent by one of four ways.)

1. By mail to: Salt Springs Resort Association, PO Box 5056, Salt Springs, Florida 32134
2. By Fax 352-685-2163 (to verify receipt of fax call 352-685-4003 and leave message. If the fax is not received the Ranger will call you back as soon as possible.)
3. By using the e-form on the Association Web site [www.MySaltSpringsResort.com](http://www.MySaltSpringsResort.com) under "Resources" - "E-forms" - "Rental Notification" (you will get a confirmation of receipt within 48 hours.)
4. Can be hand delivered to the Ranger or Duty Gate Attendant.

## Owners Rental information Form

(There is a \$5 cash check-in fee collected at check-in)

' Please print '

Date \_\_\_\_\_

Owners Name \_\_\_\_\_ Lot to Be Rented \_\_\_\_\_

Name of Renter \_\_\_\_\_ Number in Party \_\_\_\_\_

Renters e-mail address- if applicable \_\_\_\_\_

Renters Address \_\_\_\_\_

Dates to be rented: Arrival \_\_\_\_\_ mm/dd/yyyy Departure \_\_\_\_\_ mm/dd/yyyy

Renters Emergency Contact \_\_\_\_\_ Ph. No. \_\_\_\_\_

Type of Camper: Motor home \_\_\_\_\_ 5th wheel \_\_\_\_\_ Travel Trailer \_\_\_\_\_ Pop-up\* \_\_\_\_\_

Additional Motor Vehicles: \_\_\_\_\_ Boat \_\_\_\_\_ Utility Trailer. \_\_\_\_\_ Other \_\_\_\_\_

Golf Cart \_\_\_\_\_ (\$5 cash fee, per cart, collected at check-in)

\*Pop-up camper must comply with Association's plumbing requirements.

All vehicles and RV's must be neat and in good repair.

I am the owner of the above property in the Salt Springs Resort, and have informed my Guest of the Rules and Regulations and check in procedures.

Do **NOT** give out your personal gate code. A gate code will be given to them at check in

Owners Signature \_\_\_\_\_ Check here if non-paying family member or Guest \_\_\_\_

\*\*\*\*\* To be filled in at checkin \*\*\*\*\*

I have received, read, and understand the Rules and Regulations that apply to me and my Guests.

I hold SSRA harmless for any damages or injuries I, or my Guests, may incur.

Renter Signature: \_\_\_\_\_ Printed: \_\_\_\_\_

Gate Attendants Signature: \_\_\_\_\_

Amount Received \$ \_\_\_\_\_