

SHIPYARD CONDOMINIUM ASSOCIATION, INC.

305 Whitehead Street Key West, Florida 33040
305/296-0556 305/293-0251 facsimile www.tampo.com

UNIT USE NOTIFICATION

Occupancy by Lease or **Gratuitous Guest**

Property Address _____

Property Owner _____

Leasing Agency/Agent: _____

Phone: _____

Email: _____

Emergency (24 Hour) Phone: _____
(required for all rentals)

Guest(s) named on lease _____

Address: _____

Telephone: _____

Number of occupants (including names listed above) _____

Note: All Properties located within the Truman Annex are limited to a maximum occupancy, number of persons, per the governing documents; "persons" includes adults, children and infants.

Arrival Date _____ Departure Date _____

Guest(s) are authorized to use Unit Parking Space YES NO

Vehicle: make _____, model _____, and license number _____.

I attest that the Rules and Regulations of the Association have been provided and explained to the guest(s) and that the guest(s) have agreed to abide by these Rules and Regulations.

Signature of Unit Owner or Agent

Signature of Guest