

TAHOE DONNER ASSOCIATION RENTAL REGISTRATION FORM



***Required Fields**

Application Date: _____

PROPERTY OWNER:

*Name: _____ *Phone #: _____

Alternate Phone #: _____

*TD Address: _____ Unit/Lot: _____

*Mailing Address: _____

*City: _____ *State: _____ *Zip Code: _____

*Email Address: _____

Above owner contact information has changed

TD PROPERTY INFORMATION:

*No. of Bedrooms: _____

*Town of Truckee Transient Occupancy Tax Certificate Number (RCN ex: STR000-00-00-00): _____

*How will the property be managed: Owner Agent Both

COMPLAINT CONTACT INFORMATION:

Owners are required to provide contact information for a response within 45 minutes in case of a complaint.

Contact owner Check if same as above

Name: _____

Phone Number: _____

Email: _____

AND/OR

Contact property representatives in order listed below before contacting owner. Can be local friend or neighbor.

Property Management Company: _____

Name: _____

Phone Number: _____

Email: _____

Property Management Company: _____

Name: _____

Phone Number: _____

Email: _____

Property Management Company: _____

Name: _____

Phone Number: _____

Email: _____

TAHOE DONNER ASSOCIATION RENTAL REGISTRATION FORM CONT.



OWNER DECLARATION:

(INITIAL EACH BOX BELOW)

By initialing the boxes and signing below, I indicate that the information provided with this application is complete and accurate and that I have read the Covenants Rules, including the specific STR Rental Rules and associated fine schedule, and I take full responsibility for my actions and the actions of my tenant(s).

- * I agree to notify each booking party of the TD Rules
- * I agree to make available the TD Rules in the residence
- * I agree to make available the TD Emergency Evacuation Guide in the residence
- * I understand that I am responsible as the owner for all fees and fines set forth in the Tahoe Donner Covenants Rules and any and all activity/action arising from the actions of my representatives associated with the rental of my property. I agree to indemnify and hold harmless Tahoe Donner Association from any/all claims arising out of the actions of my representative.

AUTHORIZATION FOR REPRESENTATION:

(INITIAL EACH BOX BELOW)

- * I/We authorize the **Complaint Contacts** listed on page 1 to act as my/our representative in connection with responding to complaints regarding the subject property and agree to be bound by said representative's decisions or actions.
- * I hereby declare that this form and all information submitted as part of this form are true and accurate to the best of my knowledge. I am the owner of the subject property, or have been authorized in writing by the owner(s) of the subject property to represent this application, and I have obtained authorization to complete this form from any other necessary parties holding an interest in the subject property.
- * I understand it is my obligation to obtain authorization from my designated contacts to act as my representative, and I further understand that Tahoe Donner accepts no responsibility for informing these parties or obtaining their authorization.

PERSON PREPARING REGISTRATION FORM

Print Name: _____

Signature: _____ Date: _____

If not owner, relationship to owner: _____

Please inquire at the Architectural Standards Office for more information or email str@tahoedonner.com.