

MARSHVIEW

RENTAL AGREEMENT

This is a rental agreement between Judy Wren, manager, and _____ renter(s), regarding Marshview at 1902 Windjammer Lane, St. Augustine, Florida 32084.

A reservation/damage deposit in the amount of \$_____ is required to secure the rental. The deposit does NOT apply toward the rental fee, but will be held as security until the property has been inspected. Assuming no damage, lost items, extra cleaning requirements, or violation of restrictions, the deposit will be refunded within 2 weeks of the departure date.

Once a reservation is made, refunds are made ONLY if the house becomes uninhabitable OR if the manager is able to re-rent the property for the same period and amount as the original booking. If a portion of the rental time is re-booked, a pro-rata refund will be made. All refunds caused by renter cancellation will be subject to a deduction equal to 10% of monies paid.

The following is due now: Reservation/Damage deposit of \$_____

The following is due (6 weeks in advance of arrival) on this date: _____: Rent \$_____; Pet fee \$_____;
 ***Optional Cleaning fee \$_____;

*****Optional Cleaning fee.** Renters have two options: 1) Pay a cleaning fee of \$150 and do no cleaning; or 2) Pay no cleaning fee and do the following to our satisfaction: wash, dry, and fold at least one full load of sheets or towels; wash all dishes, etc.; leave the grill clean; empty the refrigerator and pantry of all opened food items; put all house hold trash and garbage in the supplied tie bags; and put all furniture and equipment back where you found them.

The total due on above date is \$_____

Only the individuals listed below can stay in the house over night. . Additional guests must be disclosed to the manager prior to the arrival date and rates adjusted if necessary. Under no circumstances can more than 6 individuals (plus baby in crib) be accommodated at any one time.

Name:	Age (if minor)	Name:	Age (if minor)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please remember the following additional restrictions:

- **DOGS ALLOWED ONLY WITH SIGNED PET AGREEMENT AND PET FEES PAID; NO CATS ALLOWED**
- **NO SMOKING INSIDE THE PROPERTY**
- **ONLY THOSE NAMED ABOVE CAN STAY OVERNIGHT; NO PARTIES, WEDDINGS, OR RECEPTIONS**
- **NO EARLY ARRIVALS OR LATE DEPARTURES WITHOUT SPECIFIC PERMISSION OF MANAGER**
- **CHECK IN DATE: _____, NO EARLIER THAN 4 PM**
- **CHECK OUT DATE: _____, NO LATER THAN NOON**
- **VIOLATION OF ANY OF THE ABOVE WILL RESULT IN FORFEITURE OF ALL OR PART OF THE DEPOSIT!**

Renter Name _____ Signature _____ Date _____
 Street Address _____ City _____ State _____ Zip _____
 Preferred Phone _____ E-Mail _____ FAX _____

PLEASE COMPLETE RENTER INFORMATION, SIGN, AND SEND ONE COPY TO:
 Judy Wren; 1024 River Oaks Road; Jacksonville, Florida 32207
 Telephone and FAX: 904-396-7555; E-Mail: wrenbeachhouses@comcast.net
 Checks should be made payable to: **Wren Beach Houses**

Manager Signature _____ Date _____