TENANT ASSOCIATE APPLICATION

Date: _____Parcel #: _____ Gate Card #: _____ _____

Property Address: _____

Property Owner Name: _____ Property Owner Phone #: _____

Associate Tenant Name(s): _____

Associate Tenant Mailing Address: _____ City, State, Zip: _____

Associate Tenant Phone: _____ Email Address: _____

I _____ own property located at _____ in Willow Valley. I have registered this property with the Mohave County Assessor office as a rental property and have provided the documentation required by WVCA as well as the documents proving tenant _____, is a full-time resident renting this property. I have signed a 12-month rental agreement beginning _____ and ending _____, at which time a new rental agreement or intent to vacate will be drawn up. I am authorizing the tenant to become an associate member. I am aware I must be in good standing and current with my dues before the tenant is able to get or renew their membership. A gate card will only be assigned to the associate I authorize and cannot be used by anyone else. The associate member will have the same marina rights as the property owner and must follow the same rules. The associate must obtain stickers by supplying a current registration with their name on it for each vehicle and/or watercraft entering the marina. If the associate causes damage and refuses to take responsibility for damages incurred, as the property owner I accept full responsibility and liability.

_____	_____	_____
Owner Signature	Print Name	Date
_____	_____	_____
Associate Tenant Signature	Print Name	Date
_____	_____	_____
Associate Tenant Signature	Print Name	Date

OFFICE USE ONLY

OWNER SIGN _____ OWNER ID _____ OWNER DUES _____ TENANT SIGN _____ TENANT ID _____ TENANT DUES _____

RENTAL AGREEMENT BEGIN/END _____ FULL TIME RESIDENT _____ REGISTERED w/MOHAVE COUNTY AS RENTAL _____ CONTACT INFO FOR EACH TENANT _____