

# PIGEON ROOST CREEK RENTAL APPLICATION

Business Address: River Cabin Rentals, 497 NW 113<sup>th</sup> Ave., Coral Springs, FL 33071 (954-752-5777)

Print these pages, fill out the information and calculate yours stays cost. Complete the rental contract and mail with the application to the address below (You can also FAX/Email/Overnight). Your signature must be on the rental contract. Send one half of the total cost as your deposit or pay in full if within two weeks of arrival **We must receive your deposit within 7 days of making the reservation or your reservation will be cancelled (mail and pay today). Make a copy of this completed application and contract for your records.**

Once your deposit, application and rental contract are received, we will mail or email you a one page combination receipt/confirmation. Your receipt/confirmation will have all the information you will need. When your deposit is received we will update our web site showing the dates you have reserved. **Final payment must be received two weeks prior to arrival or your reservation is cancelled and deposit forfeited. Mail final payment enough time in advance so that we will receive it two weeks prior to your arrival.**

A charge of \$25 for cancellation/processing will be subtracted from your deposit refund should you cancel your reservation before 30 days of arrival. The deposit is not refundable within 30 days of your arrival date, NO EXCEPTIONS.

Make checks payable to River Cabin Rentals. We prefer deposit and final payment be made by credit card using PayPal or by money order but will accept personal checks. In order to save you money we do not charge a cleaning fee. You are required to complete a cleaning/leaving checklist before you depart. The managers will make sure it was completed after your departure.

DATES ARRIVING \_\_\_\_/\_\_\_\_/\_\_\_\_ DEPARTING \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**Peak Season** April 1<sup>st</sup> to Oct 31<sup>st</sup> & Dec 20<sup>th</sup> to Jan 5<sup>th</sup> **MINIMUM TWO NIGHTS STAY REQUIRED**

\$120 Nightly or 7 DAY SPECIAL: \$720 FOR 7 nights-(one night free)

**Winter Rates(Off Peak):** \$100 Nightly or 7 DAY SPECIAL: \$600 FOR 7 nights-(one night free)

**How many nights will you be staying?\_\_\_\_\_ How many occupants?\_\_\_\_\_ (maximum of 6 occupants)**

**How many Pets? \_\_\_\_\_ (\$65 fee for up to two pets)**

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Cabin Rental Rate \_\_\_\_\_ (Total based on above rates)

Pet Fee \$65(2 pets) \_\_\_\_\_ (Non Refundable Fee-Not a deposit)

**Sub Total** \_\_\_\_\_

County Occup Tax \_\_\_\_\_ (Subtotal X.03)

NC Sales Tax \_\_\_\_\_ (Subtotal X .0775)

**Total Cost of Stay** \_\_\_\_\_

Deposit required \_\_\_\_\_ (1/2 of total cost-pay this amount now)

**Remaining amount Due:** \_\_\_\_\_ (Must be paid two weeks prior to arrival to receive lock box code)

**PLEASE CIRCLE HOW YOU WILL BE PAYING OR HOW PAID BELOW**

**DEPOSIT** paid by: CASH PAYPAL(CC) CHECK MONEY ORDER

**FINAL PAYMENT** paid in Full by: CASH PAYPAL(CC) CHECK MONEY ORDER

**Send Application, Signed Rental Contract, Deposit and self addressed stamped enveloped only if you do not have an email address to River Cabin Rentals, 497 NW 113<sup>th</sup> Ave, Coral Springs, FL 33071**

Bob or Susan Spencer Office: 954-752-5777 Email: [bob@rivercabinrentals.com](mailto:bob@rivercabinrentals.com)

VISIT OUR WEB SITE AT [WWW.rivercabinrentals.com](http://WWW.rivercabinrentals.com)

**Thank you for making your reservations with us!**

# PIGEON ROOST CABIN RENTAL CONTRACT

RIVERCABINRENTALS.COM LLC

Business Address: River Cabin Rentals, 497 NW 113<sup>th</sup> Ave., Coral Springs, FL 33071

I \_\_\_\_\_ hereby request privileges to use cabins operated by River Cabin Rentals.

**I AM AT LEAST 25 YEARS OLD. (Exceptions for Military personnel, Police Officer and full time college students—Must be at least 21 years of Age)**

I accept complete financial responsibility for any loss or damage to the cabin or to the equipment in or about the premises, resulting from acts or omissions by myself or by members of my party, whether through carelessness, vandalism, or otherwise.

Upon entering the cabin I agree to familiarize myself and each member of my party with the rules in the cabin information binder; I accept responsibility for compliance with such rules by each member of my party. I will be with my party at the cabin every night the cabin is occupied.

To keep our rates low, please leave the cabin as you found it. There is no FEE for cleaning, however you agree to pay a **\$75 dollar cleaning fee** if all items on the Leaving checklist are not completed before your departure. I understand I must pay a 7.75% NC tax and a 3% Mitchell county occupancy tax. You must take your garbage with you and dispose of it or you will be billed a **\$25 dollar garbage removal fee. Lost key fee is \$25.** You agree to pay for any and all destruction pets do including chewing damage.

I will return to River Cabin Rentals the key, and pay any remaining fees for extra days of use of the cabin at the end of my stay. I understand I will be charged an extra day if I stay past my checkout time unless prior arrangements have been made. A maximum of six occupants may stay or be in the cabin.

The Driveway at Pigeon Roost cabin can ice up during winter months. If icy, be careful and drive your car in low gear down the driveway to the parking area and drive slowly with light braking. Park at bridge on right side if need to until ice melts. There may be a bag of salt available near the front door if needed to melt the ice.

I understand that BBQ's on the deck are not allowed. I understand that if an appliance breaks it may not be repaired during my stay and that there is no refund if this happens. Your reservation may be cancelled by us at anytime. Reasons for cancellation would be serious repairs that need to be made or sale of the property should a prospective buyer come along. Your deposit and or payment in full will be fully refundable. We will try to give you as much notice as possible.

Checks returned due to insufficient funds will incur a \$75.00 charge. A cancellation and processing fee of \$25.00 will be subtracted from your deposit refund should you cancel your reservation prior to thirty (30) days of your scheduled arrival. The deposit is non-refundable within 30 days of your scheduled arrival, with **NO EXCEPTIONS**. If you cancel your reservation after final payment is received, you will be reimbursed only for the days that we are unable to rent the cabin to another party. We will make a reasonable effort to rent the cabin and you will be reimbursed on a prorated basis for any nights we are able to rent the cabin to another party.

This agreement is made pursuant to the laws of the State of Florida and both parties agree that this agreement shall be governed by Florida Law. Broward County, Florida, shall be proper venue for any litigation or legal claims involving this agreement.

This agreement may be signed in more than one counterpart, in which case each counterpart shall constitute an original of this agreement. Paragraph headings are for convenience only and are not intended to expand or restrict the scope or substance of the provisions of this agreement. Wherever used herein, the singular shall include the plural, the plural shall include the singular, and pronouns shall be read as masculine, feminine or neuter as the context requires.

I, as a result of signing this contract and renting the said premises, understand that I am responsible for reasonable attorney's fees from the other party for all matters, including but not limited to appeals, litigation, arbitration, mediation and/or administrative procedures.

## RESPONSIBILITY FOR USE AND DISCLAIMER OF WARRANTIES:

You are responsible for you and your party's safety. You assume all risks inherent in the use of this cabin AND the property and use of the item(s) in it and agree to assume the entire responsibility for the defense of, and to pay, indemnify and hold River Cabin Rentals harmless from, and hereby release River Cabin Rentals from, any and all claims for damage to property or bodily injury (including death) resulting from the use of said property, whether or not it be claimed or found that such damage or injury resulted in whole or in part from River Cabin Rentals negligence, from the defective condition of an item(s) or from any cause.

I understand that this CONTRACT may not be modified unilaterally and that full and complete execution of this CONTRACT, as written and not modified, is a prerequisite to making application for the rental of this cabin.

I agree to the terms, conditions, and obligations stated above in this Responsibility Statement and agree that any attempted modifications of the text of this Responsibility Statement may result in denial of my application to rent a cabin.

I have read and completely understand the foregoing, and I accept and assume the obligations imposed on me thereby, and the obligations imposed thereby on the members of my party, without qualification. I agree to complete the cleaning/leaving checklist, Remove all garbage from the premises, and return the key to the lock box before my departure.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Emergency Contact & Phone #: \_\_\_\_\_

Should something happen to you while up there we need someone to contact

Cabin Renting \_\_\_\_\_ Dates Cabin Rented FROM \_\_\_\_\_ TO \_\_\_\_\_

Type Vehicle & Year \_\_\_\_\_ License Plate# \_\_\_\_\_ State \_\_\_\_\_

DL# \_\_\_\_\_ State \_\_\_\_\_

Total Number of Occupants \_\_\_\_\_ (Maximum of 6) Pets (circle): Yes or NO How Many \_\_\_\_\_

Names of all occupants \_\_\_\_\_

\_\_\_\_\_

