## SUBMIT COMPLETED FORM TO THE HAMPTON HALL CLUB ADMINISTRATIVE OFFICES

Attn: Olena Barnhill accounting@hamptonhallsc.com

**Cottage Rental Notification** 

Property Owner	Member #
Property Owner 24-hour Telephone Contact	
Designated Agent	Telephone
Property Address	
$\Box$ Two bedroom $\Box$ Three bed	room 🗆 Four bedroom
Town of Bluffton Business License Number	Expires
Town of Bluffton Rental Unit Permit Number	Expires
Rental Period: From to	inclusive.
Tenant Name	
Is tenant a family member or guest of a Hampton H	Iall member?*
□ Yes Member name	Discrete Discre
Tenant Address	
Tenant contact telephone during rental	
Number of adults to occupy property Number of children	
Tenant vehicle information, if not available at the t Club Management on the first day of the rental terr	
Vehicle #1	
Year, Make, Model, Color	
License Plate Number	State of Issue
Vehicle #2	
Year, Make, Model, Color	
License Plate Number	State of Issue
Vehicle #3	
Year, Make, Model, Color	
License Plate Number	State of Issue
Cottage Owner hereby acknowledges and agrees Club, Inc. Rules and Regulations for Short Terr	• •
Owner or Designated Agent Signature	Date

Office Use: \*Registration Fee Paid: □ \$50.00 Date \_\_\_\_