

Oceancliff I & II

HOMEOWNERS ASSOCIATION

REMIT TO OCEANCLIFF I & II

UNIT: _____

WEEK: _____

OWNERS: _____

ADDRESS: _____

Must call Resort for cot request.

I authorize Oceancliff I & II to rent my unit for the year _____

E-Mail Address: _____

Please check one of the following:

Owner will occupy unit _____

Owner's guest will occupy unit

Name: _____

Owner space banked with RCI/II _____

Please put up for Rent the Full Week _____

Please put up for Rent these days _____

Signature _____