

WINTER WATERCRAFT STORAGE AGREEMENT

2024

Name _____ Telephone # _____

Address _____ E-mail _____

STOCKHOLDER: YES NO

Tenant: YES NO

If tenant, name of stockholder _____

WATERCRAFT INFO:

MAKE/MODEL/YEAR _____ NYS REG NUMBER _____

VEHICLE ID NO: _____ COLOR: _____

I have read the attached Water Storage Requirements and I agree to comply with all terms and conditions. I, the undersigned, agree to hold Vail's Grove Cooperative, Inc., harmless to responsibility of liability for loss or damage and will assume full responsibility for contamination from any cause of Cooperative property. I understand that failure to do so may result in the Cooperative removing this watercraft and invoicing my account.

SIGNATURE: _____ Date: _____

FOR OFFICE USE:

STCKER NO: _____ DATE: _____ PAID: _____

APPROVED BY: _____

For the Vail's Grove Board of Directors