

The Ponds at Foxhollow

Date Received: _____
Date Rented: _____
Date Cancelled: _____

Interval Owners In Good Standing – Permission To Rent Unit

Unit(s) Assigned: _____ Week(s) Assigned: _____ Owner Number(s): _____

I(We): _____
(Name(s) as it appears on Lease, hereinafter "Owner")

do hereby appoint THE PONDS AT FOXHOLLOW hereinafter "Association" to rent my/our unit(s) for
year: _____ usage at the best rate available in Association's sole judgment.

NOW THEREFORE, it is hereby further agreed by and between Owner and Association:

1. The Association shall act on owner's behalf to rent the week(s) or partial week(s) specified at rates determined by Association.
2. The Owner agrees to pay Association a commission of 25% of the rental amount collected. The Association agrees to seek rentals for above listed week(s) and to collect all rentals due the Owner.
3. It is understood and agreed that rentals or the rate of rentals received are not in any way guaranteed. ***Owner should call the office of the Association 3 weeks prior to the week(s) to verify any reservations.*** Owner can choose to remove the week(s) and personally use it, utilize an exchange company or continue to leave in the rental program. Should Owner choose to cancel this Agreement Owner must first contact the office of the Association to verify that the week is still available.
4. It is understood and agreed that the Association cannot guarantee the arrival of a renter but will collect an advance deposit. Association is not required to pay any uncollected rental fees to Owner.
5. Association shall not be liable for any loss or damage occurred during rental period.
6. Owner placing any week(s) in Association's Rental Program in no way relieves Owner of responsibility for paying maintenance fees.
7. Owner should retain a copy of this agreement for their files.
8. The information required below must be complete or this form will be returned and will not be listed until the correct information required is received.
9. Owner will receive any proceeds for rentals in approximately 30-45 days from renter's departure.

NOTE: For Owner to make an informed decision as to whether to use, exchange or rent their week, Owner may call the Association's office to ascertain how many similar units are in the rental program for that same week.

As evidenced by my/our signatures below, I/We have read the terms and conditions of this Agreement and agree to rent out my/our unit(s) in accordance with the terms and conditions contained herein.

Owner Signature: _____

Owner Signature: _____

Social Security#: _____
(REQUIRED)

Address: _____

City, State, Zip: _____

Home Telephone: _____

Daytime Telephone: _____

E-mail Address: _____

Please Mail or Fax to:

The Ponds At Foxhollow
Route 7
Lenox, Massachusetts 01240

Fax: (413) 637-4181

Office: (413) 637-1469