



The Blue Mountain Lake Club Boat Storage Rental Application

Administrative Use
 Year: _____ New Application: _____ Renewal Application: _____

Deeded Owner(s) Name: _____	
Spouse's Name: _____	
BML Lot#/Acct#: _____	BML Street Address: _____
Home Phone: _____	Email Address: _____
Cell Phone 1: _____	Cell Phone 2: _____
Work 1 Phone: _____	Work 2 Phone: _____
Type of Boat: _____	Model number: _____ Make: _____
Color of Boat: _____	Number of seats: _____
BML Boat Registration Sticker Number: _____	Storage Rack# _____

I agree to indemnify, defend, and hold harmless the Blue Mountain Lake Club (Association) and its staff, and its members, agents, or employees from all claims, damages, losses, injuries and expenses arising out of or resulting from rental or usage of the BML Boat Storage Area.

I agree to and understand that the Association is not responsible for damages caused by theft, fire, vandalism, collision, natural disasters, or water levels which may cause damage to or destroy Renter's boat, watercraft, or personal property stored therein.

I agree to rent Rack # _____ at the BML Boat Storage Area from January 1, 20__ to December 1, 20__. The total annual fee for this space is \$30.00. Payment must be made in advance for the entire year, and if the rental is cancelled early for any reason by either party, the renter acknowledges that there is no refund of the annual storage fee. The watercraft/boat must be removed from the slot the day this agreement expires, if not renewing for another year.

I agree and understand that I am renting Rack# _____ for my watercraft/boat with BML Registration # _____. I agree that I shall not store any other boat in this assigned rack, I shall not sublet this assigned boat Rack or allow other persons to use this assigned boat Rack. I also understand that I shall not use any other storage Rack than the one assigned to me, and I shall not change boat Racks at any time during this term of the agreement.

X _____ Date: _____
 Signature of Owner

ADMINISTRATIVE USE ONLY

Processed By: _____	Date: _____
\$30.00 Fee Paid: Check _____ MO _____ Credit Card _____	