



Association of St. C Condominium Owners

4200 Estate St. John, Christiansted, VI 00820-4491

Tel: 340-718-6341 • Fax: 340-718-1633

www.stccondo.com

manager@stccondo.com or office@stccondo.com

Unit Occupancy Form for Rentals

To be completed by the Owner, Rental Agent or property Manager and given to the office either via hard copy, email or fax no later than 24 hours prior to renter occupancy.

Unit # Owner's Name:

Arrival Date: Departure Date:

Name of Renter(s)

Number of persons to occupy the unit Maximum of three (3) persons allowed

Email:

Address: City State Zip

Home Phone: Cell:

In Case of Emergency: Name:

Phone:

Name of rental agent/property manager

Address: Business Phone

Email: Cell

I, (Renter's Name) certify that I have received a copy of the St C Rules & Regulations and I am willing to abide by them.

Signature of Renter(s)

Date:

I, (Owner's Name) acknowledge that I am responsible for ensuring renter(s) compliance of St C's Rules & Regulations.

Signature of Owner(s)

Date: