



STORAGE LOCKER APPLICATION/AGREEMENT

Name: _____ Date: _____

Address: _____ Phone: _____

THIS AGREEMENT is made effective as of the date signed below between Coosaw Point POA and named applicate above. Coosaw Point does hereby grant access to designated storage locker located on the 1st floor of the Coosaw Point River Club located in Beaufort, South Carolina, for the purpose of storing personal items at the annual recurring rate established by the Board of Directors, with a minimum period of one (1) year.

Applicant agrees to not store rubbish, perishable food, illegal items and no firearms in designated space noted below. Coosaw Point POA reserves the right to inspect the storage locker if needed. Applicant agrees to pay said fees through the Sentry Management system within 30 days of signing this agreement. This agreement is non-transferable to other individuals. Applicant will promptly notify Coosaw Point POA if usage of the storage space has ceased. The locker key must be returned upon ending the agreement, or a fee of \$50.00 will be charged for lock replacement. Applicant agrees not to alter or destruct the storage space in any way and agrees to reimburse Coosaw Point POA for damage caused by negligence or fault of Applicant.

By signing this agreement, I have and do hereby assume all of the risks of the operation and items stored in my storage locker and will hold Forino Properties SC 2 and its members, agents, and employees, and Coosaw Point Property Owner's Association, Inc, and its directors, officers, agents, and employees, harmless from any and all liability, actions, causes of actions, claims, and demands of every kind and nature whatsoever, whether for bodily injury, property damage or loss or otherwise, which I now have or which may arise in the future from or in connection with my or any individual I've allowed in participation in items stored in the designated storage locker. I also state that I am not under the influence of any chemical substance including alcohol, at the time of the signing of this Agreement.

By completing and signing the Application, I am agreeing to abide by the Coosaw Point POA Restrictions & Rules. I fully understand there is no glass allowed at the pool area. I accept full responsibility for all actions of utilizing the storage locker.

I have read and understand the Restrictions & Rules for Coosaw Point POA. I agree to abide by the provision of the policy and accept full responsibility for the proper use of my storage locker. I am signing legally on behalf of my entire household including property owners, resident owners, tenants, and guests of same.

By signing below, I agree to the terms of this agreement.

Printed Name

Date

Signature

Witness