

ARMFIELD FARM
HOMEOWNERS ASSOCIATION
Transfer of Pool Privileges Agreement for non-resident owners only

Return to:
Cedar Management Group ATTN: Pool
PO Box 481349 Charlotte, NC 28269
P: 703-707-6404 | F: 703-707-6401

E: management@armfieldfarm.org; pool@mycmg.com

**** **PLEASE PRINT CLEARLY** ****

PROPERTY

ADDRESS: _____ **Phone:** _____

TENANTS FULL NAMES: _____

TENANTS EMAIL ADDRESS: _____

CHILDREN: _____

It is understood that although I (we) have relinquished pool privileges at the Armfield Farm Pool, this in no way releases me (us) as members of the Armfield Farm Homeowners Association of the obligation to pay all required assessments. It is further understood that the Pool Regulations and Rules are to be obeyed and that continued non-compliance may result in suspension of pool use. Furthermore, I (we) certify that all persons listed on this application are permanent residents of the above address. False or erroneous information shall subject this member to suspension. Armfield Farm HOA agrees to provide, to the best of its ability, a safe and healthful pool.

The above agreement has been read and is fully understood:

Signature(s) of Homeowner _____ **Date:** _____

Printed Name(s) of Homeowner: _____ **Phone:** _____

REVIEWED BY TENANT(s)

I (we) have reviewed the foregoing information prepared by the owner of the residence which I (we) lease, do hereby certify that all persons listed on this agreement are permanent residents of the above address and that we have notice of and agree to abide by all Armfield Pool Regulations and Rules.

Signature(s) of Tenant(s): _____ **Date:** _____

Printed Name(s) of Tenant(s) _____

OPTION 2

I (we) do not wish to transfer my (our) pool privileges at the Armfield Pool to my (our) tenant(s).

Signature of Homeowner: _____ **Date:** _____

Printed Name of Homeowner(s) _____