

CITY OF WILDROSE CAMPGROUND RENTAL AGREEMENT

This agreement made _____, 20__ , between the City of Wildrose, whose address is PO Box 664, Wildrose, ND, 58795 hereinafter referred to as "Lessor" and

(Print name of the individual or organization renting the spot. If an organization is renting the spot, the organization's authorized representative's name must be included)

Whose mailing address is: _____
(Print complete mailing address)

Hereinafter referred to as "Lessee" (whether one or more)

1. Lessee shall rent space # _____, located in the following location:
_____ 101 Fisk St.
_____ 413 Carmody St. (Lots 1-5)
_____ 415 Carmody St. (Lots 6-10)
_____ 417 Carmody St. (Lots 11-15)

2. This month to month lease shall commence on _____, _____, 20__ for a rental rate of:
_____ Daily, with a rental rate of \$20.00 per day

_____ Month to month, with a rental rate of \$425.00 per month
A deposit of \$250.00, IS DUE UPON SIGNING OF LEASE

3. Lessor may change and/or increase the rental payment provided the rental payment provided above in Paragraph 2 by providing 30 days' notice to Lessee, in writing. Notice shall be deemed to have been given by the mailing of the said notice by certified or registered mail, postage prepaid, to address of the Lessee as provided above.

4. For daily rentals, the rent is due by 12:00 pm noon, for each day's use of the above described space. Check out time is 11:30 AM for each daily period.

For each monthly rental, each month's rent is due on the **FIRST DAY OF EACH MONTH. NO GRACE PERIOD SHALL BE PROVIDED. PAYMENTS AND A LATE FEE OF \$10.00 PER DAY WILL BE CHARGED. RENT NOT PAID BY THE 15TH DAY OF THE MONTH MAY RESULT IN IMMEDIATE EVICTION.**

6. If a Lessee elects to vacate the space prior to the end of the monthly rental period, no refund will be given for the unused portion of the rental payment.

7. The rental rate includes the cost of electricity, water, sewer, cable television, and garbage service. Rent does **not** include internet access or telephone service. There are access points available for those services and the lessee can contact the service provider, NCC, to set up their

own individual accounts. Billing for internet or telephone service may not be billed through the Lessor.

8. Lessor shall not be responsible for any theft, loss, or damage to the property of Lessee. Lessee further agrees to hold Lessor harmless and to assume the responsibility of any and all insurance that may be necessary for Lessee's property.

9. Lessee shall direct payment, inquiries, or other matters related to the rental described herein to the following individual:

City of Wildrose
PO Box 664
Wildrose, ND 58795
(701)539-2122

10. Lessee shall not engage in, nor permit others at his/her rental space to engage in any loud, boisterous or offensive activity that disrupts the peace and enjoyment of others.

11. Lessee must contact Lessor 10 (ten) days in advance to vacating campground. Vacating a space without informing Lessor will be considered an immediate termination of this rental agreement. No refunds on remaining rent will be made.

12. Lessee may not sub-let his/her space. Vacated spaces are rented on a first come basis through the Lessor only. The Lessee is prohibited from making rental arrangements for vacant spaces, whether their own or another space in the campground.

13. No additions or decks are allowed on campers. Dog kennels are allowed. Campers that have lean-to's approved by the Wildrose City Council prior to October 1,2014 are exempt but those additions may not be modified without approval.

14. This agreement supersedes any prior agreements made between the parties with regard to the rental space and this agreement constitutes the entire and complete agreements of the parties hereto.

15. No act or omission the part of Lessor shall constitute a waiver of any of the terms, covenants or conditions provided herein.

Dated this _____ day of _____, 20 ____ .

City of Wildrose, Lessor

Printed name of Lessee

By: _____
Signature of City Representative

By: _____
Signature of Lessee

Campground Resident Information Sheet

Space #: _____

Name(s): _____

Mailing Address: _____

State: _____ **Zip:** _____ **Phone:** _____

Permanent Address if Applicable:

Mailing Address: _____

State: _____ **Zip:** _____

Employer Information:

Employer Name: _____

Mailing Address: _____

State: _____ **Zip:** _____ **Phone #:** _____

Emergency Contact: Required

Name(s): _____

Mailing Address: _____

State: _____ **Zip:** _____ **Phone #** _____