**1666 COFFMAN CONDOMINIUM ASSOCIATION BOARD REGULATION NO. 7**

**SUBJECT: GUEST ROOM RESERVATIONS REVISED: August 27, 2019**

**I Policy and Procedures**

1. Reservations must be made by a resident.
2. Reservations must be made in person during office hours; they cannot be made by telephone.
3. A separate request form must be submitted for each stay of consecutive days and for each room.
4. **Reservations are on a first come, first reserved basis, except as specified in Section Ill.**
5. Residents can reserve one guest room three months in advance, and reserve the second guest room, if available, one month in advance, except as specified in Section Ill.
6. Residents cannot reserve a guest room for more than seven consecutive days. A stay may be extended beyond seven days if the room is not needed by another resident.
7. A waiting list of those unable to get a reservation for a preferred date will be kept in numerical order in the office.
8. Rooms should be vacated by 11 AM. Check in time is 3 PM.
9. All reservations made in accordance with the procedures in this regulation are considered valid and are not subject to being "bumped" by another resident.
10. If conflicts over reservations arise, residents are encouraged to discuss the situation and arrive at a mutually acceptable solution.

**II Payment**

1. The rental cost is $45 per night per guest room (last revised by the Board 2/18/2015).
2. Prepayment is required for each reservation at the time the reservation Is made. Payment is to be made by check for the entire rental period.
3. Reservations are not valid until the proper form and payment for the entire rental period are submitted and approved by the office staff.
4. Residents must have their rental dates written on the reservation calendar located in the office
5. Prepayment will be refunded if the reservation is cancelled 24 hours prior to the first day of the reservation. Cancellations during the holiday periods listed in Section Ill must be made at least one week prior to the first day of the reservation as a courtesy to those on the waiting list. Failure to adhere to this requirement may result in forfeiture of the entire rental fee.
6. A fee of $50 will be charged for each guest room key that is not returned to the office at the end of the stay.

**Ill. Procedures for Holidays and Lottery**

1. Restrictions for reserving guest rooms will apply for the Thanksgiving Day, Christmas Day and New Year's Day holidays;
2. Residents can reserve just one guest room for the period one week prior to, and one week after, these holidays. For example, for Christmas Day, one room can be reserved during the two-week period beginning on December 18 and ending on January 1. For all other dates, the policies and procedures in Section I apply.
3. Residents can request to reserve one guest room for these holiday periods starting three months in advance of the holiday. If two or more residents wish to reserve a guest room for the same day(s) during the same holiday period, a drawing will be held in the office two months prior to the date of the holiday. Residents not winning the lottery will be put on a waiting list in the order in which their names are drawn from the whole pool of names. Reservations will be awarded in that order.
4. If there is a cancellation, the room will be available to the next person in line.
5. Residents wishing to reserve a room after the lottery has taken place will be added to the end of the waiting list.
6. If two weeks prior to the holiday, the second guest room remains vacant during the two- week period surrounding the holiday, the resident reserving the first guest room can reserve the second guest room.

RESERVATION REQUEST FOR USE OF

1666 COFFMAN GUEST ROOMS

**45.00 Per Night Entered on the calendar date\_\_\_\_\_\_\_\_\_\_\_**

#  **Reservation nights \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ through \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**First night Last night**

**Number of nights \_\_\_\_\_\_\_\_\_\_\_\_ Amount Due \_\_\_\_\_\_\_\_\_\_\_\_ Check Number \_\_\_\_\_\_\_\_\_**

**Unit No. \_\_\_\_\_ Resident \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Make sure your name is on the calendar.**

**Resident Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Managers Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Pick up the guest room key on the first day of rental during office hours.**

**If rental Starts on the Weekend pick up key on the Friday before.**

## East Guest Room \_\_\_\_ West Guest Room \_\_\_\_\_

Key returned on \_\_\_\_\_\_\_\_\_\_\_ Managers Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Reservations are only accepted with payment

**ATTACH CHECK HERE**