OM VILLAGE 1 GUEST APPROVAL FORM

304 N 3rd St

Date _____

Name of Steward (print) _____ Signature _____

Name of Guest (print) _____ Signature _____

The Guest will stay at OM Village for _____ night(s).

Date of the first night: _____

Date of the final night: _____

The Steward asserts that the following conditions required for this request will be honored:

□ Permission to host a Guest is being requested at least 24 hours prior to the Guest's visit. □The Guest will only reside and sleep in the Tiny House of the Steward host

□ The duration of the Guest's visit will not exceed 14 consecutive nights

□ This request will not exceed the Steward's Guest limit of 14 nights per month

□ This request will not exceed the Steward's Guest limit of 2 weekend nights (Fri and/or Sat) per month

□ This request will not exceed the Steward's Guest limit of 56 days per 365-day period

Signatures of Residents

_____ _____

Resident #1 Resident #2

_____ _____

Resident #3 Resident #4

_____ _____

Resident #5 Resident #6

_____ _____

Resident #7 Resident #8

_____

Resident #9