

OCEAN VIEW FARMS, INC. PLOT ASSIGNMENT AGREEMENT

Start Date _____ Phase _____ Plot Number _____

.....

Member's Name _____

Street Address _____

Apt. # _____

City _____ **Zip Code** _____

Mailing Address (if different) _____

City _____ **Zip Code** _____

Home Phone No. (____) _____ **Other Phone No.** (____) _____

E-mail Address* _____

Occupation _____

Household members who will also be gardening with you _____

(**Non-family members must sign waiver on back*)

I have received a copy of the *Ocean View Farms, Inc.* Rules and Regulations. I understand that my continued membership at *Ocean View Farms, Inc.* is contingent upon my compliance with these Rules and Regulations, as well as the annual completion of my community service obligation.

Signature _____ **Date** _____

.....

FEES: Plot Rental: \$88.00/year per plot Amount of check \$ _____

Associate: \$10/year Check Number _____

.....

FUNDS DISTRIBUTION

Plot Rental \$ _____ **Keys** \$ _____ **Other** \$ _____

Associate \$ _____

Name of Phase Representative

Signature of Phase Representative

Date

(New member must sign Waiver on opposite side)

* Required to receive OVF renewal notifications. All communications sent to email address on record will be considered delivered.