



Rehoboth Beach, DE 19971
302-227-5000 • 800-800-4132

800 Kings Highway
Lewes, DE 19958
302-645-2881 • 800-800-4129

Reservation #
Agent Code:

SEASONAL RENTAL LEASE ADDENDUM

I / We the undersigned Tenant(s) of _____, _____ DE 19971, for the period from 2:00 PM on _____ through 10:00 AM on _____ do hereby acknowledge and agree to rent under the following terms and conditions:

Rental Amount:	\$ _____
Security Deposit:	\$ _____
Administrative Fee:	\$75.00
Prepaid Maintenance for trash service:	\$ _____
Tax / Other:	\$ _____
Travel Insurance (Optional)	\$ _____

Total Amount Due: \$ _____

PAYMENT SCHEDULE

\$ _____ (10% of Rent & Admin Fee) **DUE TODAY**
 \$ _____ (25% of Balance) **DUE NOT LATER THAN**
 \$ _____ (25% of Balance) **DUE NOT LATER THAN**
 \$ _____ (25% of Balance) **DUE NOT LATER THAN**
 \$ _____ (Balance of rent, security deposit, tax and prepaid fees) **DUE IN CERTIFIED FUNDS (NO CASH) ON CHECK-IN DATE!**

1. PAYMENTS: TIME IS OF THE ESSENCE ON ALL PAYMENTS: A late fee of \$50.00 will be due if payment is received after payment due date. There is a \$50.00 charge for each check returned as uncollectible for any reason. All payments following any uncollectible check must be certified funds. All payments within 30 days of check-in must be certified funds, Visa or MasterCard. Credit card payments can only be accepted from Tenant(s) with signatures hereon. **NO CASH OR CREDIT CARDS WILL BE ACCEPTED ON CHECK-IN DATE.**

2. SECURITY DEPOSIT & DAMAGES: YOUR FINAL PAYMENT INCLUDES THE SECURITY DEPOSIT. SECURITY DEPOSIT IS PAYABLE BY CERTIFIED FUNDS ONLY. Only certified funds can be accepted during the 30 days prior to your check-in date. Tenant(s) is responsible and liable for any and all damages, other than normal wear and tear, to the premises, furnishings, equipment and household items therein which occurred during tenancy. **The security deposit, less charges for damages, etc. will be returned and made payable to the first person named on the face of the Residential Lease Agreement Deposit Request.**

x _____ x _____ x _____ x _____ x _____ x _____ x _____
 Tenant's Initials
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3. OCCUPANCY AND PARKING: OCCUPANCY IS LIMITED TO NO MORE THAN [REDACTED] PERSONS. PARKING ON THE PREMISES IS LIMITED TO NO MORE THAN [REDACTED] CARS. Exceeding these numbers is a violation of this lease and shall be cause for termination of the lease and eviction.

4. EVICTION AND ACCESS: In the unlikely event that Tenant(s) violates community / city ordinances, becomes objectionable to neighbors or creates damages to the leased property, the Agent, at his sole discretion, may evict Tenant(s) with immediate effect. Tenant(s) acknowledge that, in this event, no refund shall be given, even if the property is re-rented. Coldwell Banker has an **ABSOLUTE ZERO TOLERANCE** policy regarding malicious and negligent damage to the property by Tenant(s) or guests of Tenant(s). If it is determined at any time during the tenancy, that the property has been damaged or is in jeopardy of being damaged, the tenancy will be immediately terminated and Tenant(s) evicted. Tenant(s) specifically agrees to allow Agent immediate access to the premises for the purpose of inspection if Agent receives complaints and/or police reports about the tenancy or notice of violation of community/city ordinances by Tenant(s).

5. CLEANING: Tenant is responsible for trash removal, lawn maintenance, cleaning and maintaining the premises in a clean and orderly condition during the term of this lease. Tenant(s) agrees that Landlord may charge Tenant(s) for an end of season cleaning and/or carpet cleaning.

6. LANDLORD TENANT CODE NOT APPLICABLE TO THIS AGREEMENT: Tenancies of 120 days or less in Broadkill Hundred, Lewes Rehoboth Hundred, Indian River Hundred and Baltimore Hundred are not intended to be governed by the Delaware Residential Landlord Tenant Code.

7. RECEIPT OF DEWEY BEACH ORDINANCES: Tenant(s) acknowledges receipt of Dewey Beach Ordinances (if applicable).

8. SMOKE DETECTORS: Tenant(s) is responsible to maintain the smoke detector battery according to Delaware Smoke Detector Law and acknowledges receipt of Office of State Fire Marshall pamphlet "Delaware's Smoke Detector Law. . . & You."

9. LEAD PAINT DISCLOSURE: Tenant(s) acknowledges receipt of Lead Paint Disclosure (if applicable).

10. RESPONSIBILITY OF TENANT(S): Unless otherwise noted below, Tenant(s) shall be responsible for arrangement and payment of all utilities:

Tenant is to pay for electric, phone, cable. CB will transfer the electric on behalf of tenant. Tenant shall prepay \$100.00 for trash service. Owner will maintain lawn.

11. CHECK-IN INSPECTION: Tenant(s) acknowledges the responsibility to fill out and return a check-in inspection form to Agent not later than 24 hours after check-in, noting any damages found in subject property.

12. INSPECTIONS: It will be mandatory for the agent to conduct a monthly inspection of the rental property. Agent will schedule said inspection with tenant at least 24 hours prior of said inspection. It will not be necessary for tenant to be present, although it is recommended.


13. RENTER'S INSURANCE: Tenant understands that personal property belonging to the tenant is not covered under the Landlord's homeowner's insurance policy. If a Tenant desires coverage it will be necessary for the tenant to purchase renter's insurance to cover personal property from any loss or damage.

x [REDACTED] x _____ x _____ x _____ x _____ x _____ x _____

14. OTHER TERMS AND CONDITIONS:

Tenant is to pay for end of seasonal cleaning and carpet cleaning which CB will arrange for the tenant after their departure date.

15. SIGNATURE: By signing this below I understand the terms and conditions of this Residential Lease Agreement Deposit Request and attached Seasonal Rental Lease Addendum and am willing to abide by and be bound by same. All parties certify that they are at least 18 years of age.

	_____	_____
Signature of Tenant#1	Name (Please Print)	Date
_____	_____	_____
Street Address	City, State,	Home Telephone
_____	_____	_____
Work Telephone	Cell Phone	E-Mail Address

_____	_____	_____	
Signature of Tenant #2	Name (Please Print)	Date	
_____	_____	_____	
Street Address	City, State,	ZIP	Home Telephone
_____	_____	_____	_____
Work Telephone	Cell Phone	E-Mail Address	

_____	_____	_____	
Signature of Tenant #3	Name (Please Print)	Date	
_____	_____	_____	
Street Address	City, State,	ZIP	Home Telephone
_____	_____	_____	_____
Work Telephone	Cell Phone	E-Mail Address	

_____	_____	_____	
Signature of Tenant #4	Name (Please Print)	Date	
_____	_____	_____	
Street Address	City, State,	ZIP	Home Telephone
_____	_____	_____	_____
Work Telephone	Cell Phone	E-Mail Address	