



Check In Date: \_\_\_\_\_  
 Check Out Date: \_\_\_\_\_

## NORTH Guest Suite Policy Agreement (for Guests and Residents)

- The Guest Suite amenity/privileges are available to Homeowners or Tenants in residence only. Rental of these suites is not to be conferred to friends, relatives or associates of non-resident owners.
- Guest Suite rental does not include or assume access to the Club Room, Gym, Spa or Conference Room.
- Residents of the Guest Suites may use the amenities if accompanied by an Ellington resident.
- At no time are keys to the Club Room, Spa or Gym to be given to tenants of the Guest Suites.
- Unless specific arrangements have been made with the Concierge, Ellington residents must be present to check in their guests so that introductions to the Concierge can be made and the appropriate paperwork completed.
- Booking and Payment for the Suites:  
 Homeowner agrees to pay full amount at the time of booking.  
Cancellation policy is as follows:  
 If cancelled 30 days or more in advance: the full payment will be refunded.  
 If cancelled 14-29 days in advance: 50% shall be refunded.  
 If cancelled 13 days or less: the entire amount shall be forfeited.  
*Should the dates of your cancellation be booked to another resident, your payment will be refunded, regardless of the above stated time schedule.*

*Payment is to be made by check only, payable to the Ellington HOA. Any third party check that is dishonored shall be the responsibility of the Homeowner.*

- Each reservation is limited to a 4-night stay and a limit of 2 occupants, but an extension may be granted if the suite has no other reservation at the time of daily checkout. Payment for additional reservation is required at that time.
- Reservations are limited: Homeowners and Tenants may only reserve a maximum of 4 days per month and cannot have any more than 8 days on the books for the remainder of any calendar year.
- Check-in time is 3:00PM and check-out time is 11:00AM, the Ellington staff may authorize exceptions.

Occupants of a guest suite(s) are considered guests of the Homeowner or Tenant. Under the Rules and Regulations, guests must comply with all condominium rules and regulations and the hosting resident is responsible for all guest behavior, misbehavior and resultant damage.

NO SMOKING IS ALLOWED IN THE GUEST SUITE. NO PETS ARE ALLOWED IN THE GUEST SUITE.

If cleaning of upholstery or carpet is required to remove stains or odors after a reservation has checked out, a fee of \$100.00 will be issued; and the respective Homeowner will pay for any additional cleaning costs. Equipment and furnishings shall not be removed from a Guest Suite.

Please complete the information below:

Guest Name: \_\_\_\_\_

Dates of stay: \_\_\_\_\_ # of Nights: \_\_\_\_\_ **NORTH GUEST SUITE**

Hosting Homeowner Name: \_\_\_\_\_ Unit #: \_\_\_\_\_

**By signing below, you agree to follow Ellington Rules & Regulations and take responsibility for any damages.**

Homeowner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

AMOUNT PAID \$: \_\_\_\_\_ Check #: \_\_\_\_\_

Ellington Concierge: \_\_\_\_\_ Date: \_\_\_\_\_

## North Guest Suite Inspection - North Tower

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CHECK-IN		CHECK-OUT	
Bathroom	COUNT	Bathroom	COUNT
4 Bath Towels (2/rack 2/toilet)		4 Bath Towels	
2 Hand Towels (on towel rack)		2 Hand Towels	
2 Wash Cloths (on towel rack)		2 Wash Cloths	
1 White Marble Amenity Dish		1 White Marble Amenity Dish	
Bedroom		Bedroom	
6 Pillows (2 bed, 2 extra in closet, 2 décor) condition:		6 Pillows (2 bed, 2 extra in closet, 2 décor) condition:	
1 Comforter condition:		1 Comforter condition:	
1 <i>Seattle</i> Book		1 <i>Seattle</i> Book	
TV/Remote (bedside)		TV/Remote (bedside)	
Coffeemaker (off?)		Coffeemaker (off?)	
Clock Radio (alarm off?)		Clock Radio (alarm off?)	
Luggage Rack			
Coffee setup complete: coffee/creamers/sugar/sweetener, 4 napkins/4 spoons	Y/N	Setup needs:	
Carpet & Rugs condition:		Carpet & Rugs condition:	
Sheets & Blankets condition:		Sheets & Blankets condition:	
Odors: Y/N smoke/pet/other – specify:		Odors: Y/N smoke/pet/other – specify:	

**Check-In Inspection by:** \_\_\_\_\_ **date:** \_\_\_\_\_

**Check-Out Inspection by:** \_\_\_\_\_ **date:** \_\_\_\_\_

Notes:

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