



Reservation for the Palms Estates Rv Community

SHORT TERM RESERVATIONS

- **Short term reservations** require a deposit of ½ the total balance on or prior to arrival.

ELECTRICAL SERVICE

- *30/50 amp service is provided. No new splitters are allowed.*
- *Live Oak/Yellow Birch sites - Meters are at each site.*
- *Bramhall Rd sites - 50 amp Meters on each site*

ELECTRIC IS BILLED MONTHLY

2022 - 2024 Schedule of Rates

Length of Stay	Rate	Deposit	Balance
1 day	\$36	\$36	NA
1 week	\$210	\$210	NA
1 month	\$659*	\$330	\$329
2 month	\$1254*	\$627	\$627
3 month	\$1724*	\$862	\$862
4 month	\$2090*	\$1045	\$1045
5 month	\$2350*	\$1175	\$1175
6 month	\$2508*	\$1254	\$1254
Yearly	\$ 2760*	\$230/month	

- *PLUS ELECTICITY*

NOTE: THIS IS A NO PET COMMUNITY

For Office Use only:

Deposit Amount \$ _____
 Date Received _____
 Check Number _____
 Balance due \$ _____

Please complete all documents and return to PE along with your deposit as indicated on the Fee Schedule.

NAME(S) _____

Approx. ARRIVAL _____

Approx. DEPARTURE _____

SITE RESERVED _____

REGISTER YOUR RV

YEAR _____

MAKE _____

MODEL _____

WIDTH _____

LENGTH(Including tongue) _____

#NUMBER OF SLIDE OUTS _____

Live Oak and Yellow Birch -Max RV length 40 ft

A copy of this form will be returned to you as your confirmation. If a site is not available your check will be returned to you.

REFUND POLICY. NO REFUND of any part of the rental fee, except in case of medical emergency, unless we are able to re-rent your site.

Signature

Date



APPLICATION FOR RENTERS AND RVers
The Palms Estates of Highlands County, INC.

P.O. Box 364
Lorida FL 33857-0364 Date _____
(863) 655-1909

Gentleman's Name: _____
Last First Middle Initial
Date of Birth _____ Place of Birth _____
Marital Status: Single _____ Married _____
(Former) Occupation _____
Hobbies, activities, social interests _____

Lady's Name: _____
Last First (Maiden)
Date of Birth _____ Place of Birth _____
Marital Status: Single _____ Married _____
(Former) Occupation _____
Hobbies, activities, social interests _____

Home Address _____

City State Zip

Phone _____ **Cell Phone** _____

Contact Person in case of emergency: _____

Address: _____

Phone _____ **Relation** _____

Denomination _____

How did you learn of The Palms Estates? _____

Please return this Application to The Palms Estates, P. O. Box 364, Lorida, FL. 33857-0364