## COMAL COUNTY WATER RECREATIONAL DISTRICT NO. 1

P.O. Box 310009 New Braunfels, TX 78131-0009 ccwrd1@gmail.com



#### **AUTHORIZED USER ELIGIBILITY FOR RENTAL PROPERTY**

Property Owner hereby abandons and transfers all Property Owner's District Recreational

Privileges and access to all C.C.W.R.D. No. 1 owned property, other than as a guest of a

properly registered Property Owner or Authorized User, to the Tenant for the period indicated in
the Lease agreement.

District Recreational Privileges of a Tenant extend only to those persons listed on the lease <u>and</u> their minor children residing at the Property. Persons meeting <u>both</u> of the aforementioned conditions are the <u>ONLY</u> persons who can become Authorized Users of the Tenant.

District Recreational Privileges of a Tenant of a vacant lot rental extend only to those persons listed on the lease <u>and</u> their <u>minor children</u> that would normally reside at the Property, as if there were a habitable structure on the property. Persons meeting <u>both</u> of the aforementioned conditions are the <u>ONLY</u> persons who can become Authorized Users of the Tenant.

Only one family per legally platted property will be granted Water Recreational District Privileges.

C.C.W.R.D No.1 utilizes the Comal Appraisal District records (comalad.org) to determine the legal description and ownership of property within the District.

In order for a Tenant to utilize the District Recreational Privileges of the property, the Property Owner must properly register all Tenant's authorized users with C.C.W.R.D. No.1 via submission of the attached Affidavit Form.

# AFFIDAVIT OF AUTHORIZED USER ELEGIBILITY FOR RENTAL PROPERTY

STATE OF TEXAS	
COUNTY OF COMAL	
PLEASE ENTER OWNERSHIP INFORMATION EXACTLY AS SHOWN IN COMAL APPRAISAL DISTRICT RECORDS (coma	alad.org)
PROPERTY OWNER'S NAME	
MAILING ADDRESS	
CITY STATE ZID CODE	

All parties to this Affidavit have personal knowledge of facts set forth in this Affidavit, which are true and correct, and are fully competent to make statements set forth below:

As the Property Owner, I understand and acknowledge that the <u>only</u> persons that may be listed as, or become an Authorized Users of the District Recreational Privileges as a Tenant of the property listed below are those persons listed on the lease <u>and</u> their minor children residing at the property.

I further understand and acknowledge that District Recreational Privileges <u>cannot</u> be extended to adult children, grandparents, parents, uncles, aunts, nieces, nephews, cousins, brothers, sisters, friends, or ex-spouses of the Tenant.

I understand the Board reserves the right to require an original copy of a birth certificate and/or a State issued I.D. of any person listed as an authorized user for the purposes of eligibility verification.

I understand and acknowledge that knowingly and/or intentionally providing false or misleading information to C.C.W.R.D. No. 1 in this affidavit or in any other form, for the purpose of allowing an ineligible person to become an Authorized User of C.C.W.R.D. No. 1 property will result in a 60 day suspension of District Recreational Privileges. The suspension will be for the Property Owner and all Authorized Users and/or Tenant and all Tenant's Authorized Users.

I understand the suspension will include the Property Owner(s) and Tenant's children, grandchildren and great grandchildren, and their spouses and any other person listed on the lease agreement. The suspension will exclude access by any and all other means, including access as a guest of another Property Owner or renter, or criminal trespass, to all C.C.W.R.D. No. 1 owned property for the designated period. The suspension will be for a continuous 60 day period to be determined by and at the sole discretion of the Board of Directors.

I understand the Board of Directors will provide the Property Owner notification of suspension of District Recreational Privileges for the Property Owner and Tenant, and the effective dates of suspension, via registered mail, to the address shown in the Comal Appraisal District records.

As the Property Owner, I further understand if I wish to make any changes to the Authorized User list subsequent to filing of this affidavit with the District, I must submit a new Affidavit Form, which must include proof of eligible relationship to the Property Owner for any additional Authorized Users

### PLEASE COMPLETE THE FORM BY TYPING YOUR PROPERTY'S LEGAL ADDRESS AS SHOWN IN COMAL APPRAISAL DISTRICT RECORDS (comalad.org), AND YOUR TENANT'S AUTHORIZED USER INFORMATION INTO THE APPROPRIATE BOXES

All information gathered, collected or otherwise obtained in this document is for the sole, exclusive and private use of C.C.W.R.D. No. 1 to determine property owner authorized user's eligibility. This information will not to be distributed or otherwise disseminated in any fashion, except as required by law.

### PROPERTY OWNER INFORMATION AFFIDAVIT

	STREET	NUMBER	LOT # (S)	BLOCK #
		AUTHO	DRIZED USER LIST	
	RELATIONSHIP TO PROPERTY TENANT	LAST NAME	FIRST NAME	DATE OF BIRTH (MO /DAY / YEAR
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Personally attesting and declaring under penalty of perjury, that <u>the information</u> <u>provided in this affidavit, by the undersigned, is true and correct to the best of my knowledge and belief.</u>

This instrument was executed on this	s da	ay of _		
BY:			MONTH	YEAR
PROPERTY OWNER- ACCORDING TO COMAL A	APPRAISAL DISTRICT			
PROPERTY OWNER- ACCORDING TO COMAL A	PPRAISAL DISTRICT			
PROPERTY OWNER CONTACT INFORM	MATION FOR C.C.	.W.R.D. I	No. 1 CORRESPON	DENCE
MAILING ADDRESS		ADDRESS  CITY STATE  EPHONE NUMB	ER	_
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Thank you

download.