

Please Collect Vehicle, Vessel and Trailer Information

prior to submitting this form Receipt #: _____

\$35.00 per day Monday - Thursday
Additional \$10.00 per day for boats not preregistered
\$100.00 per weekend (Friday-Sunday)
Additional \$25.00 for boats not preregistered

GUEST VESSEL REGISTRATION

MEMBER # _____

Lot _____ Tract _____ HROA Property Address _____

MEMBER OR TENANT Name(s) _____

Guest Name _____

Guest Phone (Cell/Home) _____ Guest E-mail: _____

Watercraft Info: Owner (last name) _____ Watercraft Registration/CF # _____

Vessel Description _____

Vessel Trailer License Number: _____

Vehicle Color, Make and Model: _____ **License Number:** _____

Length of Stay: (From) _____ To _____

Are you camping? Yes No

Will this vessel be moored in an HROA Boat Slip or Dock? Yes No If yes, Slip/Dock #: _____

Signature: _____ Date: _____

INSTRUCTIONS

- Guest Vessels are required to pre-register with the HROA Member Services Office prior to arrival. Unregistered vessels will be admitted as visitor vessels for residence parking only.
- To register, complete this form and email it to office@hroa.us, or deliver to the Heritage Ranch Member Services Office, 2130 Heritage Loop Road, Paso Robles, in the Oak Hill Market Center (next to Rock N Robles).
- Guest and Visitor Vessels must arrive by 11:00 p.m. and check in at the Main Gate on Gateway Drive.
- Permits must be displayed in the vehicle window at all times. Permits may be picked up at the Member Services Office a day or two before the first day of the reservation.
- Prior to launching from the HROA ramp, Guest Vessels must obtain an HROA Mussel Inspection at the Mussel Inspection Kiosk at the HROA Marina. **The Kiosk is only open on weekends during the boating season while the HROA Ramp is open. The Guest must present a current DMV registration in their name to receive an inspection. Visit <https://hroa.us/boating-information/mussel-inspections> for additional information.**
- When it is posted that "HROA Decals are Required," Guest Vessels must park their trailers in designated overflow parking areas.

Cash Credit Check #: _____

FOR OFFICE USE ONLY () Copy to Main Gate

Amount paid for use: _____

Received by: _____

Date Received: _____

EFT PAYMENTS

DATE _____ MEMBER ID # _____

PROPERTY OWNER ACCOUNT NAME _____

NAME ON ACCOUNT ONLY IF DIFFERENT _____

ROUTING NUMBER: _____

ACCOUNT NUMBER: _____

AMOUNT: _____

PAYMENT FOR _____

PHONE NUMBER OR

EMAIL ADDRESS _____