

| SITE NUMBER: | |
|-----------------|--|
| DEPARTURE DATE: | |

| SANDY PINES WINTERIZING ORDER FORM | | | | | |
|--|------------------|--------------------------------|------------------------|----------------------------|--|
| Name: | | | | | |
| Please use the number key (below) to mark the following locations in relation to your trailer on the map (to the right): 1. Outside Faucet Locations 2. Water Filter Locations 3. Sprinkler Control Locations | R O A D | | TRAILER | | |
| COMMENTS: | | | | | |
| | | | | | |
| | | | | | |
| OTHER KEY INSTRUCTIONS: | | | | | |
| What site number is your riser in front of? Do you want your power turned off? You you have outside faucets? Yes No you have a water filter? Yes No Keys on file or provided? Yes No | es 🗆 No |] No If yes, how man | y? | | |
| | | Departure | Date | | |
| Trailer and Line (Includes final pumpor | ut) 🗌 | Before Oct. 1 \$100 | Oct. 1 \$120 | | |
| Marked Line to Trailer only (for empty site | <u> </u> | \$50 | \$60 | | |
| Sprinkler Syste | m 🔲 | \$65 | \$75 <u> </u> | | |
| | | | Total | | |
| By signing below I understand any winterizing guarantee, if offered, exte warranty faucets, toilet valves, seals, loose fittings, leaks, hot water heate required information, including date of departure. Winterizing will be do complete the winterization. We do not guarantee shared lines. | ers, sprink | ler controls, appliances, or o | ld or inferior water | pipe. I have completed all | |
| Signature | Date | | Daytim | ne Phone | |
| Office use only: Keys Received? Yes | No | | | | |
| Maintenance use only: Date Done: | | Bv: | | | |