



**Queen Esther Estates Lot Owners Association**  
**PO Box 934 Sayre, Pennsylvania 18840**

**HOMEOWNER RENTAL TRANSACTION FORM**

Please fill out the information and submit to the QEELOA Board of Directors within 5 days of your rental agreement. Attach copy of the lease with this form.

Purpose of this request is if there is an issue, we need someone to contact if the homeowner is unavailable at the time.

Please print clearly.

HOMEOWNER(s) NAME: \_\_\_\_\_

Address: \_\_\_\_\_ Lot #(s): \_\_\_\_\_

Email(s): \_\_\_\_\_

Phone: \_\_\_\_\_

RENTER'S NAME(s): \_\_\_\_\_

Email(s): \_\_\_\_\_

Phone(s): \_\_\_\_\_

Please email this for to [qeeloaboard@gmail.com](mailto:qeeloaboard@gmail.com) . Thank you in advance for your cooperation.  
*The QEELOA Board of Directors*