

# Blossom Hills Two Community Association

C/O VISION COMMUNITY MANAGEMENT  
16625 S Desert Foothills Parkway  
PHOENIX AZ 85048  
PH (480) 759-4945 FAX (480)759-8683  
Email: BlossomHillsTwo@wearevision.com

## PEDESTRIAN GATE KEY REQUEST FORM

Number of Keys Requested: \_\_\_\_\_

Homeowner Name: \_\_\_\_\_ Date: \_\_\_\_\_

Property Address: \_\_\_\_\_ Lot/Unit #: \_\_\_\_\_

Phone Number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address (if different from property address for mailing of the key(s)):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### (IF APPLICABLE)

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**Please note, keys will not be released to tenants or management companies without written homeowner authorization on file. Please contact Vision Community Management to ensure you are authorized to obtain a key.**

Tenant Name: \_\_\_\_\_

Property Management Name/Address:

\_\_\_\_\_  
\_\_\_\_\_

Phone Number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

### Homeowner Acknowledgement

**Keys may be purchased at a cost of \$10.00 per key.**

**Please make check or Money Order payable to: Blossom Hills Two Community Association**

Signature of Person Receiving Key(s): \_\_\_\_\_ Date: \_\_\_\_\_

### (OFFICE USE ONLY)

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Administrator: \_\_\_\_\_ Mailed Key / Homeowner Pick-Up (Circle One)

Date: \_\_\_\_\_