

Palomino Pointe Association

C/O Vision Community Management
16625 S Desert Foothills Parkway
Phoenix, AZ 85048
PH (480) 759-4945 * FAX (480)759-8683
Email: PalominoPointe@wearevision.com

Front Gate/Pool Gate Fob Form

Number of Fobs Requested: _____

Homeowner Name: _____ Date: _____

Property Address: _____ Lot/Unit #: _____

Phone Number: (_____) _____ - _____ Email: _____

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

**HOMEOWNER ACKNOWLEDGEMENT
FOB(S) MAY BE PURCHASED FOR \$30.00.
(ONLY MONEY ORDER OR CHECK ACCEPTED - PLEASE MAKE PAYABLE TO PALOMINO
POINTE ASSOCIATON)**

Signature of Person Receiving Fob(s): _____ Date: _____

(OFFICE USE ONLY)

Administrator: _____ Mailed Fob / Homeowner Pick-Up (Circle One)

Date: _____ Check/MO # _____