

PARK PREMIERE TOWNHOUSE ASSOCIATION

C/O VISION COMMUNITY MANAGEMENT

16625 S. Desert Foothills Parkway

PHOENIX, AZ 85048

Office: (480) 759-4945 FAX: (480)759-8683

Email: parkpremiere@wearevision.com

POOL KEY REQUEST FORM

Homeowner Name: _____ Date: _____

Property Address: _____

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

(If Applicable)

Tenant Name: _____

Property Management Name/Address: _____

Please send my key to the following address (if different from the property address):

HOMEOWNER ACKNOWLEDGE

I, HEREBY ACKNOWLEDGE RECEIPT POOL KEY(S) FOR PARK PREMIERE TOWNHOUSE ASSOCIATION. I ALSO ACKNOWLEDGE THAT DUPLICATION OF THE KEY(S) IS PROHIBITED. LOST/REPLACEMENT KEYS MAY BE REPLACED AT A COST OF **\$15.00 EACH**.

(ONLY MONEY ORDER OR CHECK ACCEPTED AND MADE PAYABLE TO PARK PREMIERE TOWNHOUSE ASSOCIATION)

Homeowner Signature: _____ Date: _____

Property Manager Signature: _____ Date: _____

(OFFICE USE ONLY)

Date: _____ Mailed Key / Date: _____ Picked-up Key
Administrator Initials: _____ Check/MO # _____