

# Shadow Rock at the Foothills Association

C/O VISION COMMUNITY MANAGEMENT  
16625 S DESERT FOOTHILLS PKWY  
PHOENIX, AZ 85048  
(480) 759-4945 FAX (480)759-8683  
EMAIL: Shadowrock@WeAreVision.com  
**GATE REMOTE REQUEST FORM**

Amount of Remotes \_\_\_\_\_

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)

**Please note, remotes will not be released to tenants or management companies without written homeowner authorization on file.**

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

Property Management Name/Address:

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

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

## HOMEOWNER ACKNOWLEDGEMENT

Lost/Additional Remotes may be replaced at a cost of \$25.00. (ONLY MONEY ORDER OR CHECK ACCEPTED - PLEASE MAKE PAYABLE TO SHADOW ROCK AT THE FOOTHILLS OWNERS ASSOCIATION)

Signature of Person Receiving Remote: \_\_\_\_\_ Date: \_\_\_\_\_

(OFFICE USE ONLY)

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

Date: \_\_\_\_\_ Check/MO # \_\_\_\_\_

Remote # \_\_\_\_\_