

GARDENS AT SOUTH MOUNTAIN
c/o VISION COMMUNITY MANAGEMENT
16625 S. DESERT FOOTHILLS PARKWAY
PHOENIX, AZ 85048
PHONE: (480)759-4945 FAX: (480)759-8683
Email: GardensAtSouthMountain@WeAreVision.com

Homeowner Name: _____ **Date:** _____

Phone Number: _____ **Alternate Phone Number:** _____

Email: _____

Mailing Address: _____

VEHICLE #1 CONTACT INFORMATION (If Applicable)

Resident Name: _____

Phone Number: _____ **Alternate Phone Number:** _____

Email: _____

PARKING PERMIT WILL BE MAILED TO MAILING ADDRESS LISTED ABOVE

VEHICLE INFORMATION

1 Vehicle per form
MAKE:
MODEL:
COLOR:
PLATE #:
YEAR:
Office Use Only
Pass # Issued:

I understand by signing below, I am the responsible Financial Party and take responsibility for myself or the residents listed above.

OWNER SIGNATURE _____ **DATE:** _____

(Office Use Only)

Board of Directors Approval Date: _____ **Parking Personnel Notified Date:** _____