

**CASA REQUENA HOMEOWNERS ASSOCIATION**  
**C/O VISION COMMUNITY MANAGEMENT**  
**16625 S Desert Foothills Parkway, Phoenix, AZ 85048**  
**(480) 759-4945 FAX (480)759-8683**  
[casarequena@wearevision.com](mailto:casarequena@wearevision.com)

**PEDESTRIAN GATE KEY REQUEST FORM**

**\*\*Payment and form must be returned in order to have key mailed out\*\***

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

Mailing Address: \_\_\_\_\_ Lot #: \_\_\_\_\_

Phone #: \_\_\_\_\_ # of Keys: \_\_\_\_\_

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HOMEOWNER ACKNOWLEDGE

I, HEREBY ACKNOWLEDGE REQUEST FOR THE GATE KEY(S) FOR THE CASA REQUENA HOMEOWNERS ASSOCIATION. I ALSO ACKNOWLEDGE THAT DUPLICATION OF THE KEY IS PROHIBITED. LOST/REPLACEMENT KEYS MAY BE REPLACED AT A COST OF **\$15.00 EACH**.

**(ONLY MONEY ORDER OR CHECK ACCEPTED – PLEASE MAKE PAYABLE TO CASA REQUENA HOA)**

Homeowner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**(OFFICE USE ONLY)**

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Date: \_\_\_\_\_ Mailed Key \_\_\_\_\_ Picked-up Key \_\_\_\_\_ Administrator Initials: \_\_\_\_\_

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