

PREMIERE AT DESERT BREEZE
C/O VISION COMMUNITY MANAGEMENT
16625 S. DESERT FOOTHILLS PARKWAY
PHOENIX, AZ 85048
(480) 759-4945 FAX (480)759-8683
Email: DesertBreeze@WeAreVision.com

TENNIS COURT KEY FORM

Number of Keys _____

Homeowner Name: _____ Date: _____

Property Address: _____ Lot/Unit #: _____

Phone Number: (____) _____-_____

Mailing Address (if different from property address): _____

HOMEOWNER ACKNOWLEDGE

I, HEREBY ACKNOWLEDGE REQUEST FOR THE TENNIS COURT'S KEYS FOR PREMIERE AT DESERT BREEZE. I ACKNOWLEDGE THAT I HAVE READ AND AGREE TO FOLLOW THE RULES FOR USE OF THE COURT. I ALSO ACKNOWLEDGE THAT DUPLICATION OF THE KEYS IS PROHIBITED. LOST/REPLACEMENT KEYS MAY BE PURCHASED AT A COST OF \$25.00 EACH.
(ONLY MONEY ORDER OR CHECK MADE OUT TO PREMIERE AT DESERT BREEZE HOA IS ACCEPTED, AND THE ACCOUNT MUST BE CURRENT AND PAYMENT MUST BE RECEIVED IN ORDER TO RECEIVE KEYS. ALL HOMEOWNERS ARE LIMITED TO TWO KEYS.

Homeowner Signature: _____ Date: _____

(OFFICE USE ONLY)

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