

The Gardens Inc. Homeowners Association
c/o Vision Community Management
16625 S Desert Foothills Pkwy | Phoenix, AZ 85048
Office: (480) 759-4945 Fax: (480) 759-8683
Email: thegardens@wearevision.com

POOL/PEDESTRIAN KEY REQUEST FORM

Number Key(s) _____

Homeowner Name: _____

Date: _____

Property Address: _____

Lot/Unit #: _____

Phone Number: (____) _____ - _____

Mailing Address (if different from property address): _____

(If Applicable)

Property Management Name/Address: _____

(If Applicable)

Tenant Name: _____

Property Management Name/Address: _____

HOMEOWNER ACKNOWLEDGE

I, HEREBY ACKNOWLEDGE REQUEST FOR THE POOL'S KEY(S) FOR THE GARDENS I ALSO
ACKNOWLEDGE THAT DUPLICATION OF THE KEY(S) IS PROHIBITED. KEYS MAY BE
PURCHASED FOR \$25.00 EACH. (ONLY MONEY ORDER OR CHECK MADE OUT TO THE
GARDENS HOA ARE ACCEPTED).

Homeowner Signature: _____

Date: _____

Property Manager Signature: _____

Date: _____

(OFFICE USE ONLY)

Date: _____ Mailed Key / Date: _____ Picked-up Key Administrator Initials: _____

Check/MO # _____