

La Tierra Condominium Association

C/O VISION COMMUNITY MANAGEMENT
16625 S Desert Foothills Parkway
PHOENIX AZ 85048
PH (480) 759-4945 FAX (480)759-8683
Email: LaTierra@wearevision.com

FITNESS/POOL FOB REQUEST FORM

Amount of Fobs _____

Homeowner Name: _____ Date: _____

Property Address: _____

Phone Number: (_____) _____ - _____ Email: _____

Mailing Address (if different from property address for mailing of the key(s)):

- I (or my tenant/authorized agent) will pick up the fob(s). **PHOTO ID WILL BE REQUIRED.**
- Please send my fob(s) via certified mail. I have included a check or money order for the \$15.00 processing fee for this service.
- Please send my fob(s) regular USPS mail. I understand that Vision is not responsible for the lost key fob(s).

(IF APPLICABLE)

Please note, keys will not be released to tenants or management companies without written homeowner authorization on file. Please contact Vision Community Management to ensure you are authorized to obtain a fob.

Tenant Name: _____

Property Management Name/Address:

Phone Number: (_____) _____ - _____ Email: _____

HOMEOWNER ACKNOWLEDGEMENT

Fob(s) may be purchased for **\$15.00. (ONLY MONEY ORDER OR CHECK ACCEPTED - PLEASE MAKE PAYABLE TO LA TIERRA CONDOMINIUM ASSOCIATION.)**

Signature of Person Receiving Key(s): _____ Date: _____