

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

AGENT AUTHORIZATION FORM

Please use this form to designate your agent/property manager as the primary contact for mailed correspondence. All correspondence will be mailed to one designated contact per lot.

Property Address: _____ Lot #: _____

Homeowners Name (s): _____

Off-site mailing address: _____

Home Telephone: _____ Work Telephone: _____

E-Mail: _____ Cell Telephone: _____

Agent/Property Manager Authorization:

Please provide the following information only if you would like to authorize an agent or property manager to be the sole receiver of mailed correspondence regarding your property.

Agent Name/Company Name: _____ / _____

Mailing Address: _____

Home Telephone: _____ Work Telephone: _____

E-Mail: _____ Cell Telephone: _____

Please note, if you designate an agent or property management company as the primary contact, the homeowner will no longer receive the correspondence via regular mail.