

GATE LISTING AND CODE ASSIGNMENT FORM

Date of Request: _____

Association: _____

Property Address: _____

Property Owner's Name: _____

Tenant's Name: _____

**IF SOMEONE OTHER THAN THE OWNER OCCUPIES THE PROPERTY
PLEASE PROVIDE A COPY OF THE CURRENT "LEASE AGREEMENT"**

Name to Be Put in Directory: _____
(PLEASE PRINT CLEARLY)

Phone Number to Be Programmed into Gate: _____
(Number must be a local number)

Phone Number for Emergency: _____

The undersigned Property Owner acknowledges receipt of the Covenants, Conditions and Restrictions and Rules and Regulations of the Association and will abide by them at all times.

Property Owner's Signature

Date

For Office Use Only

Directory Code Assigned: _____

Request Completed by: _____

Date Request Completed: _____