



APPLICATION FOR ADDITIONAL GATE ACCESS TAG

NAME OF RESIDENT.....

UNIT NO. DATE OF APPLICATION

TELEPHONE..... E MAIL OR FAX

Terms and Conditions:

1. For control purposes, the Directors have determined that ideally only two gate access tags may be issued per unit.
2. It is understood that owners of investment units may require a tag as well as the two that will be required by tenants.
3. Application can be made for an additional tag by completing this form and providing a reason for the need of an additional tag.
4. The Approval of an additional tag is at the sole discretion of the General Manager.

THE REASON FOR REQUESTING AN ADDITIONAL ACCESS TAG IS:

Applicant Signature: _____ Date _____

General Manager Signature: _____ Date _____

APPROVED	DECLINED
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