

Request for Pool Key or Gate Fob

All assessments and fees must be current!

This form and a waiver must fob.	t be completed and returned to our	office in order to re	ceive you	r pool key card or	gate
NAME:					
Last	First				
ADDRESS:					
PHONE:	EMAIL:				
	IMPORT <i>A</i>	NT!			
Only the legal Owner of	record may request a pool key or g	ate fob. Owners a	e respon	sible for ensuring	any
	home is provided the pool key and			_	ble for
any	loss of pool keys or gate fobs provi	ded to a Tenant or	Occupant	. <u>.</u>	
• •	e and each home will receive onl Additional or replacement keys or f equested.		-		
ı	am requesting my free Pool Key an	nd/or Gate Fobs:			
Numbe	er of Additional or Replacement Po	ol Key(s):	¢ \$25.00 e	each	
Number	r of Additional or Replacement Gate	e Fob(s):	x \$25.00	each	
Pl	ease make checks payak	ole to SOHO S	quare		
of the Board or the Managing however, <u>if payment is not rec</u>	egular mail to the address listed below Agent, fees for additional or replaceme eived within fifteen (15) days of the ch in full is received. You may e-mail this	ent keys or fobs may narge date the addition	be charge onal or rep	d to an Owner's acc	ount obs will
		Date:	/	2019	
	e (at least one Owner must sign) ze Essex Association Management, LP, Association to charge my/our account f		-		

Essex Association Management, LP 1512 Crescent Drive, Suite 112 Carrollton, TX 75006

fob(s) indicated above. I/we understand that if payment is not submitted within fifteen (15) days of the date above the newly

issued pool key(s) and/or gate fob(s) will be deactivated until I/we have paid the amount due in full.