## Superstition Commons Owners Association 16625 S. Desert Foothills Parkway Phoenix, AZ 85048

(480) 759-4945 FAX (480) 759-8683 Email: SuperstitionCommons@WeAreVision.com

Pool Key Request Form

Homeowner Name(s)	Property Street	Address	
COMPLETE IF OWNER'S MAILI	NG ADDRESS IS NOT PROPERTY STR	REET ADDRESS:	
Mailing Street Address	Maili	Mailing City, State, Zip, Country	
Please select an option from the	e following:		
☐ I (or my tenant/authorized agent) v	vill pick up the key(s) at the VISION office. Ph	OTO ID WILL BE REQUIRED.	
	ve <b>mailing address</b> via certified mail. The As narged a \$15.00 certified fee for additional ke	esociation will cover the first key mailed certified. I y(s).	
	perty address via certified mail. The Associat narged a \$15.00 certified fee for additional ke		
Please provide information f	or either the Tenant or your Autho	rized Agent.	
Key(s) may be released to th	e following Tenant:		
Tenant's Information: (Please P	rint)		
Name:	Phone #:	Email:	
Name:	Phone #:	Email:	
Key(s) may be released to th	e following Authorized Agent:		
Authorized Agent's Information	: (Please Print)		
Name:	Phone #:	Email:	
Mailing Address:			
	PHOTO IDENTIFICATION WILL BE I	REQUIRED	
ACKNOWLEDGE REQUEST FO THE HOMEOWNER OR AUTHO COMMUNITY MANAGEMENT RESPONSIBLE IF THE KEY(S)	OR THE KEY(S) FOR THE SUPERSTIT DRIZED AGENT REQUEST KEY(S) TO AND/OR SUPERSTITION COMMONS IS LOST DURING TRANSIT. ADDITION EY ORDER OR CHECK ACCEPTED-PI	S TO THE COMMUNITY POOL. I, HEREB ION COMMONS OWNERS ASSOCIATION. I D BE MAILED OUT REGULAR MAIL, VISION IS OWNERS ASSOCIATION WILL NOT B NAL KEY(S) MAY BE OBTAINED AT A COS LEASE MAKE PAYABLE TO SUPERSTITION	
Homeowner Signature:		Date:	
Kay Issued:	Office Use Only	Programming Paguacted	