

**VILLA LA VERNE HOMEOWNERS ASSOCIATION
Pool FOB Distribution Form**

HOMEOWNER INFORMATION:			
Homeowner Name(s):		Date:	
Onsite/Property Address:			
Offsite Address:			
MAIL POOL FOB TO :			
<input type="checkbox"/> RESIDENT AT PROPERTY ADDRESS <input type="checkbox"/> HOMEOWNER OFFSITE ADDRESS			
Email Address:		Home Phone:	
Cell Phone:		Work Phone:	

TENANT/RESIDENT INFORMATION (if different from above):		
Tenant Name:		
Tenant Name:		
Cell Phone:	Home Phone:	Work Phone:

I, _____, hereby request a Pool FOB. This Pool FOB is provided by the Association at no cost to the owner. **NO MONEY IS DUE AT THIS TIME.** If in the future, this pool FOB is lost or stolen and requires replacement, the cost will be \$100.00 for replacement. By signing this agreement below, you accept the terms of this contract.

Homeowner Signature:	Date:
X	
Print Homeowner Name:	

Return signed form to:
So Cal Property Enterprises, 1855 Sampson Ave, Corona, CA 92879 Phone: (951) 270-3700
 · Fax: (951) 270-3709 · Email: frontdesk@socalenterprise.com