

SOUTHAMPTON HOMEOWNERS ASSOCIATION

POOL FOB REQUEST FORM

MAIL TO: P.O. BOX 2427 HUNTERSVILLE, NC 28027

OWNER INFORMATION

PLEASE PRINT

OWNER: _____

COMMUNITY ADDRESS: _____

MAILING ADDRESS: _____
STREET

_____ CITY _____ STATE _____ ZIP

EMAIL: _____

NOTES:

OTHER INFORMATION

DO YOU RENT YOUR HOME? YES NO *Pls Circle One*

RENTER(S): _____
PLEASE LIST ALL NAMES INCLUDING CHILDREN

New property owners are provided one free. _____ MUST BE CURRENT ON ASSESSMENTS TO ACCESS POOL

FOBS @ \$10 EACH: _____ ARE ASSESSMENTS CURRENT: YES NO *Pls Circle One*

TOTAL FOBS REQUESTED: _____ @ \$10 EACH = \$ _____ COLLECTED

CHECK #: _____ CASH \$ _____

PLEASE SEND FOB(S) TO : OWNER RENTER *Pls Circle One*

SIGNATURE: _____ DATE: _____

FOR OFFICE ONLY:

FOB NUMBER: _____ DATE PROVIDED: _____ INITIALS: _____

