

LAS BRISAS ASSOCIATION

1720, 1730, 1750, 1760 Halford Avenue
Santa Clara, CA 95051

Cabana Key Card Form

By signing below, I am authorizing my tenant or property management representative to confirm receipt of the new Cabana access key card assigned to my unit. I understand that should the Cabana key card be lost, my homeowners account will be billed \$50.00 for a replacement key card. **Additionally, I understand that a copy of my valid, current form of photo identification is required to be accompanied with this form.**

Unit Owner Name: _____
(Please Print)

Las Brisas Address: _____
(i.e.: Building and Unit #)

Signature: _____

By checking this box, I am authorizing my tenant or property management representative to pick-up the Cabana key card on my behalf.

Name of Tenant or: _____
Property Mgmt. Rep. (Please Print)

Signature of Tenant or: _____
Property Mgmt. Rep.

Important: Tenants and property management representatives will not be permitted to pick-up Cabana key cards without this signed form and a copy of the unit owner's valid, current form of photo identification. Additionally, tenants and property management representatives must present their valid, current form of photo identification at the time of pick-up in order to receive the Cabana key card.

Association Use Only

Key Card Number: _____

Issued By: _____

Date: _____

The Masters Group
Association Management Company
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