

WOODSIDE HOMEOWNERS' ASSOCIATION

- NEW MAILBOX KEYS - Distribution and Authorization Form

Unit #: _____ Legal Owner(s) Name: _____
(Please Print)

Please select ONE of the following delivery options:

- Owner will pick up all keys on distribution day or at Woodside office thereafter.
(ID will be required)
- Owner requests release of all keys to their tenant(s) or property manager listed below, to be picked up on distribution day or at Woodside office thereafter. (ID will be required)

Tenant's Name: _____
(Please Print)

Tenant's Phone #: _____

Property Management Company: _____
(Please Print)

Property Manager Phone #: _____

I, as the Legal Owner, agree that the Association and/or Association Management Company, may release all mail keys to either my tenant or property manager whom I've listed above:

Keys will not be released without completion of this form.

Owner's Signature: _____ Date: _____

Please Send Completed Form To:

Woodside Homeowners Association
2274 Woodside Lane
Sacramento, CA 95825

Email To: office@woodsidehoa.com

*** This notice will also be posted on the Woodside HOA website**

FOR OFFICE USE ONLY:

Mailbox #: _____

HHP Received: _____ Keys Picked-Up By: _____ Date: _____