

Keyway Place

HOMEOWNERS ASSOCIATION, INC.

Gate Access Information Form

Please print clearly Date _____

Owner Name: _____

Owner address: _____

City _____ State _____ Zip _____

Phone number to be used for gate: _____

4 digit personal code _____

Bar code Numbers: 1) _____ 2) _____ 3) _____

If someone other than the owner of record will be residing in the property, please provide this information below.

Resident's Name: _____

Property Address: _____

Is this a new home? ___ Yes ___ No

Please provide the previous owner's information below so they may be removed from the gate.

Previous Owner's Name: _____

Your information will be entered into the gate within 24 hours with the exception of Friday or Company Holidays. In that event, it will be entered on the next normal business day. You will be notified of your directory and gate code numbers by mail. Each family will receive two remotes at no charge from the builder at closing. If you wish to make any changes to the information listed in the gate or have any issues with your code, please contact the Management Office at 941-870-4920.