

POOL CARD REQUEST FORM

HOA1

HOA2

1. Last Name _____ First Name _____

2. Address _____

3. Email _____ Phone Number _____

- I understand I will be required to fill out additional paperwork to obtain my pool card. Please fill out the information requested. SouthShore Management will contact you regarding your request. Prior to issuing your pool care we are required to issue a copy of the pool rules to you and have you sign a pool waiver form.

Please be advised that in order to receive a pool card your account must be:

- Paid in full- Zero balance due on HOA dues
 No outstanding violations
 South Fork Covenants are enforced
- Renters- Rental/lease application on file with the HOA
 - ARB compliance

Request forms can be returned via the following methods:

Fax- 813 600-1582 or email at info@southshoremgmt.com or Mail it to SouthShore Property Management P.O Box 925 Ruskin FL 33575

Office Only – TO BE FILLED OUT BY HOA1 or HOA2 Representatives Only

- Zero Balance on HOA fees _____
 Outstanding Violations: _____
 ARB compliance: _____
 Renters/Rental Lease Application on file _____
 Pool card fee paid _____ check # _____
 Card Number: _____
 Pool Card Approved by: _____