GRANDE PRESERVE
AT CYPRESS LAKES

Tenant Amenity Access Registration Form

Property Address: _____

Tenant Name: _____

Phone Number: _____

Email Address: _____

Lease Start Date: _____Lease End Date: _____

Property Owner Name: _____

Emergency Contact: _____Emergency Contact Phone:_____

Access Credential Number: _____

Tenant Acknowledgement:
I acknowledge receipt of an Association access credential and agree to comply with all governing documents, rules, regulations, and amenity policies. I understand my amenity access expires upon termination or expiration of my lease.

Tenant Signature: _____ Date: _____

Management Use Only

☐ Lease Approved☐ Lease Copy Saved☐ Photo ID Verified☐ Photograph Taken☐ Previous Tenant Access Removed☐ Owner Access Suspended☐ Tenant Expiration Date Entered☐ Credential Activated☐ Database Updated☐ Owner Access Restoration Noted

Issued By: _____ Date: _____