

Unit Access

THIS FORM REFERS TO PEOPLE OR COMPANIES YOU WOULD AUTHORIZE TO HAVE ACCESS TO YOUR UNIT WITHOUT HAVING TO CALL FOR APPROVAL.

Owners' Names:

St. Raphael Unit Number: _____

Provide Name of Company or Write "Guest"	Provide Specific Name(s) or Write "Anyone"	Provide Specific Dates or Write "Indefinite" (May be Revoked at a Later Date)	Is the Contractor Authorized to Provide a list of Sub-Contractors Who May Also Enter Your Unit on Their Behalf? (Yes, No or N/A)

Signature

Date

PLEASE NOTE: BY SIGNING THIS FORM, I AUTHORIZE ACCESS TO MY UNIT TO THE ABOVE-NAMED AND ALLOW MANAGEMENT TO GIVE MY UNIT KEY FOR THIS PURPOSE. I ACKNOWLEDGE THAT MANAGEMENT DOES NOT CHECK AFTERWARDS THAT CONTRACTOR HAS LOCKED AND SECURED MY UNIT.