

WATERS' EDGE METROPOLITAN DISTRICT NO. 1
ACCESS KEY FOB REQUEST FORM

Property Owner(s) (please print): _____

Property Address: _____

Out-of-District Address (if applicable): _____

Email: _____

Contact Numbers: _____

Additional Users*: (**Must be at or over 18 years old, renters/tenants, babysitters, caregivers and adult children only**)

Anyone listed on the above line is **REQUIRED to sign the "Additional User Waiver & Consent Form".*

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KEY FOB REQUESTS: for all new key fobs, replacement key fobs, or adding on additional key fob requests.

New Key Fob	1 st and 2 nd complimentary	Qty.	
New Key Fob	\$40.00 each (3 rd fob and up)	Qty.	
Replacement Key Fob	\$40.00 each replacement	Qty.	
		Total Amount Due:	

****CASH WILL NOT BE ACCEPTED****

ALL CHECKS & MONEY ORDERS SHOULD BE MADE PAYABLE TO:
WATERS' EDGE METROPOLITAN DISTRICT NO. 1

PLEASE SEND FORMS AND PAYMENT TOGETHER TO:

Water's Edge Metropolitan District
c/o Public Alliance
7555 E Hampden Ave, STE 501
Denver, CO 80231

Please contact Justin Janca with questions:
justin@publicalliancecellc.com
(720) 213-6621

FOR OFFICE USE ONLY:

All Items Received: Y or N	If Not: Date Returned to Owner:
DATE RECEIVED:	
PROCESSED BY:	
CHECK/MONEY ORDER:	
DATE ACTIVATED:	