LAKE PADGETT ESTATES INDEPENDENT SPECIAL DISTRICT ELECTRONIC PARK PASS APPLICATION

NAMES:		
ADRESS:		
PHONE NUMBERS: Home:	Cell:	
I hereby make application to the District for an elect (2) of the following documents as evidence of my "c	ronic gate pass to the parks. I hav	
Driver's License#		5
Utility Bill with current address:		
Tax Bill: Year:		
Title Insurance Co closing statement: Closing Date:		
If you are renting please provide the name and phone		
Name:	Phone Number:	
The park rules and regulations have been developed copy at the time of this application. I further underst guests to the park and I may not sell or loan my pa the pass will mean automatic cancellation of the pass I further understand that anyone using this pass may employees, guards or Board members at the time I a my residence and are eligible to use the parks:	and that those rules mean I must ss to any non-resident. Any unau s and any other penalty determine be asked to show identification, am use. The following persons re	accompany any uthorized use of ed by the Board.
Children: Provide last names only if they are differen		
Names:	Ages:	
Names:	Ages:	
Names:	Ages:	-
I hereby declare all of the information I have provide	d is true and correct.	
Signature of Resident	Date:	
ELECTRONIC PARK PASS ISSUED #	à	
BY:		