

VILLAGE OF DORAL LAKES HOA
 Office: 305.259.1461
ADDITIONAL REMOTE REQUEST FORM
 www.dorallakes.org

DATE: _____

ACCOUNT # 1787-_____

CURRENT OWNER(S) INFORMATION		
LAST NAME:	FIRST NAME:	
UNIT ADDRESS:		
CITY:	STATE:	ZIP:
MAILING ADDRESS IF DIFFERENT:		
CITY:	STATE:	ZIP:
CONTACT #:	CELL#:	
TENANT(S) INFORMATION (Please also fill out owner(s) information)		
LAST NAME:	FIRST NAME:	
UNIT ADDRESS:		
CITY:	STATE:	ZIP:
MAILING ADDRESS IF DIFFERENT:		
CITY:	STATE:	ZIP:
CONTACT #:	CELL#:	
LEASE START:	LEASE END:	

NEW REMOTE(S) ID ASSIGNED TO							OFFICE USE ONLY
Tag	Last Name	First Name	Make	Model	Year	Color	Remote ID
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

DEACTIVATE BROKEN REMOTE(S) ID (Find remote ID outside or inside device)		
ID# _____	ID# _____	ID# _____

OFFICE USE ONLY

RECEIVED BY:	DATE:
VERIFIED BY:	DATE:
APPROVED/REJECTED BY:	DATE:
ACTIVATED/DEACTIVATED BY:	DATE:

MAIL TO: Miami Management Inc.
 14275 SW 142 Avenue
 Miami, FL 33186

OR DROP OFF AT: Guardhouse

* Mail or Drop off the form with your check “payable to” Village of Doral Lakes.
 * Each remote is \$25 dollars. Cash is **NOT** accepted