

### Permission to Enter Premises

Unit Number \_\_\_\_\_

Contact Information:

Owner(s) Name(s):  
\_\_\_\_\_  
\_\_\_\_\_

Mobile Phone Number: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Work Phone Number: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Home Phone Number: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Resident(s) Name(s) if different than above:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Guests allowed entry without prior notice:

- \_\_\_\_\_ Relation to person (for example: friend, maid, brother) \_\_\_\_\_
- \_\_\_\_\_ Relation to person (for example: friend, maid, brother) \_\_\_\_\_
- \_\_\_\_\_ Relation to person (for example: friend, maid, brother) \_\_\_\_\_
- \_\_\_\_\_ Relation to person (for example: friend, maid, brother) \_\_\_\_\_
- \_\_\_\_\_ Relation to person (for example: friend, maid, brother) \_\_\_\_\_
- \_\_\_\_\_ Relation to person (for example: friend, maid, brother) \_\_\_\_\_
- \_\_\_\_\_ Relation to person (for example: friend, maid, brother) \_\_\_\_\_

**Important (please read carefully):** This form requires the signature of the occupying resident. All Guests must receive a Visitor's Pass and park in a space designated for Visitor Parking. If a guest is to occupy the unit for more than a month, then Management must be notified so that proper arrangements can be made. If you wish to add an additional occupant, the screening procedure and pertinent fee shall apply. **No lease for duration of less than a year is permitted in Brickell Place Phase II Association.** You are responsible for notifying security and/or management of any changes to your contact information and this list. Attain verification of such changes. By signing below you hereby acknowledge, understand, and accept all the information set forth herein.

\_\_\_\_\_ (print name of resident/owner)      Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_ (signature of resident/owner)

-----For office use only-----

Reviewed and approved by: \_\_\_\_\_ (print name)

\_\_\_\_\_ (signature)      Date: \_\_\_\_/\_\_\_\_/\_\_\_\_