

# NEWPORT ISLES PROPERTY OWNERS ASSOCIATION, INC.

## Resident Access Information Form

*If you are a new resident you must include either your warranty deed or lease agreement with this form for the information to be processed.*

This form must be fully completed in legible print.

Owner \_\_\_\_\_ Tenant \_\_\_\_\_ Identification # to be Assigned by Office Personnel: \_\_\_\_\_

Recorded Property Owner Name: \_\_\_\_\_

Property Owner Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Newport Isles Property Address: \_\_\_\_\_ Lot#: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ (This will be the number used for contacting resident for guest authorization)

**Occupant 1** Name: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Occupant 2** Name: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

### **Additional Listing of Occupants living at this address:**

1: Name: \_\_\_\_\_ Owner / Minor / Tenant / Occupant

2: Name: \_\_\_\_\_ Owner / Minor / Tenant / Occupant

3: Name: \_\_\_\_\_ Owner / Minor / Tenant / Occupant

4: Name: \_\_\_\_\_ Owner / Minor / Tenant / Occupant

5: Name: \_\_\_\_\_ Owner / Minor / Tenant / Occupant

**GATEHOUSE PHONE NUMBER (772) 345-1272  
This is the number you need to call for guest authorization**

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**Permanent Visitors**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_

**Permanent Service Personnel**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_

**Vehicle Information**

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Tag: \_\_\_\_\_  
Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Tag: \_\_\_\_\_  
Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Tag: \_\_\_\_\_  
Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Tag: \_\_\_\_\_

**Emergency Contact**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

**Emergency Alerts:** ( i.e. DO NOT ADMIT, CALL FOR ALL VISITORS ) \_\_\_\_\_

I understand I must use my PIN# as provided by Newport Isles for identification when authorizing access to the property for any guest or visitor to my home. Further, I understand all guests will be required to show Photo ID whether or not the guest is listed on this form. I understand it is my responsibility to update this form with any changes.

Occupant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return this completed form in person to the Newport Isles Clubhouse**  
**PHOTO ID WILL BE REQUIRED OF OWNERS, TENANTS, GUESTS**

Tenants must provide a copy of a current lease  
1856 SW Newport Isles Blvd.  
Port Saint Lucie, FL 34953  
Tel: (772) 345-1642

\*\*\*\*\*  
OFFICE USE ONLY  
APPROVED FOR ENTRY { }YES BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE ENTERED \_\_\_\_\_