



## ***Resident Departure / Return Form***

Per the DOR section 2.12, for security reasons, all Owners must notify the Manager when leaving their property for more than fourteen (14) days. Please fill out this form and leave it with the Office.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name of person with whom you have left your key: \_\_\_\_\_

Departure Date: \_\_\_\_\_ Return Date: \_\_\_\_\_

*Away Address:*

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_ Zip \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_



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