

**CROSSPOINTE VILLAGE HOMEOWNERS ASSOCIATION  
RESIDENT ACCESS FORM**

**The following information will be entered into the computer and used to allow and verify entry information for guests, family members, friends, contractors and all other requests. It is very important that this form is completed in its entirety as this will determine the gate officers choice of action and his or her options.**

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

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

The Gate Officer may contact the home telephone number between the hours of:

\_\_\_\_\_ To \_\_\_\_\_ Or All Hours: \_\_\_\_\_

If tenant, please list owners name: \_\_\_\_\_

**NAMES OF ALL RESIDENTS AT THE PROPERTY: (FIRST & LAST)**

_____	_____
_____	_____
_____	_____

**PERSONS & CONTRACTORS TO BE ALLOWED ENTRY WITHOUT TELEPHONIC APPROVAL DIRECTLY TO YOUR HOME:**

_____	_____
_____	_____
_____	_____
_____	_____

The resident will be contacted by telephone to request authorization to allow any person to enter the Association that is not listed on the above list. If a resident is expecting a guest on a particular date that is not on the above list, the Gate Officer can be contacted by telephone to provide the name of the person.

\_\_\_\_\_  
Homeowner/Resident Signature