

## VILLAS OF WINDMILL POINT II POA., INC.

273 SW STERRETT CIRCLE, PORT ST. LUCIE, FLORIDA 34953-3325

WEBSITE: <u>VWP2.COM</u> PHONE: (888) - POA-VWP2 EMAIL: POA@VWP2.COM
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## POOL KEY REQUEST (WITH \$50 DEPOSIT) (FORM #1-PD)

I,, an approved and registered Resident of the Villas	
(PRINT NAME CLEARLY)	
of Windmill Point II, residing at the address of:	
	(PRINT ADDRESS CLEARLY)
	do hereby deposit \$50.00 with the POA.
for a Security Key for the Pool Gate and Bathrooms	s, which I understand may not be copied, sold,
transferred, loaned or given to any other individual	to use. If I move from the Villas, I will return the
key to the POA and submit a completed Refund Re	quest Form (FORM #1-PR) for a refund of my
deposit within thirty days of my end of occupancy, o	or I acknowledge I will forfeit my right to request a
refund, and the POA may keep the funds to offset the	heir expenses. If I lose the key, I understand I
must purchase a replacement under the same term	s. I have read the POOL RULES posted and the
Pool Rules of the POA in the Board Rules and Reg	
abide by all the provisions therein or I may forfeit m	
Rules and Regulations of the POA.	<i>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</i>
SIGNED:	DATED:
POOL KEY ISSUED BY:	
(Signature)	(Print Name)
DEPOSIT PAID BY:	DATED:
(Cash, check, money order or other)	