

**EPIC ASSOCIATION MANAGEMENT  
8712 SPANISH RIDGE AVE  
LAS VEGAS, NEVADA 89148**

DATE \_\_\_\_\_

HOMEOWNER NAME \_\_\_\_\_

HOMEOWNER ADDRESS \_\_\_\_\_

UNIT ADDRESS \_\_\_\_\_

**I ACKNOWLEDGE RECEIVING A SWIMMING POOL GATE KEY  
FROM THE BOARD OF DIRECTORS OR FROM EPIC ASSOCIATION  
MANAGEMENT ON THE ABOVE DATE.**

**I UNDERSTAND EACH UNIT WILL BE ISSUED ONLY ONE KEY  
AND THE KEY CANNOT BE DUPLICATED. IF SAID KEY IS LOST  
I AGREE TO PAY \$150.00 FOR A REPLACEMENT KEY.**

\_\_\_\_\_  
SIGNATURE TELEPHONE NUMBER

KEY NUMBER \_\_\_\_\_

I HAVE BEEN GIVEN A COPY OF THE RULES & REGULATIONS.

\_\_\_\_\_  
SIGNATURE DATE