



Sea Gate Association Vehicle Access Control Application

EMAIL APPLICATION TO INFO@SGANY.ORG TO SCHEDULE AN APPOINTMENT

| |
|-------------|
| Last Name: |
| First Name: |
| SG Address: |
| Phone: |
| Email: |

| <u>Type</u> | <u>Qty</u> | |
|---------------------|------------|-----------------|
| Homeowner | | x \$50.00 |
| Parking Only | | *HO only |
| Tenant | | x \$200.00 |
| Employee | | x \$200.00 |
| Family Mem. | | x \$200.00 |
| Tag /Replacement | | x \$10.00 |

Vehicle Information:

| | Plate # | Make | Model | Color | Reg. State | Year | Name of Registrant |
|--------|---------|------|-------|-------|------------|------|--------------------|
| VEH. 1 | | | | | | | |
| VEH. 2 | | | | | | | |
| VEH. 3 | | | | | | | |
| VEH. 4 | | | | | | | |
| VEH. 5 | | | | | | | |

*Must include the following: License of applicant, license of registrant if different from applicant, current registration

*Tenants, please include a photo of your current lease or letter from the homeowner also.

***Homeowners are considered those listed on the deed, their spouses, and their children.**

*New vehicles with different name on registration must include a letter of permission from the registrant, in addition to a copy of their license.

