Fountain Lakes Community Association, Inc. **Barcode Registration** Date: Association Name: Owner Name & Phone Number: _____ Renter Name & Phone Number: ______ Confirmed Lease/Expiration Date: _____ Confirm Ownership: _____ Fountain Lakes Address: Telephone for Gate: Vehicle 1 Make/Model/Color: _____ Barcode: Vehicle 2 Make/Model/Color: Plate: Barcode: Vehicle 3 Make/Model/Color: Plate: Barcode: Vehicle 4 Make/Model/Color: _____ Plate: Barcode: _____ Gate Code: (four-digit code) Key Fob: _____ Key Fob: _____ Key Fob: _____ DELETE Barcode: _____ Barcode: _____ Key Fob: _____ Key Fob: _____

Office Use Only		
Paid Amount:	Circle: Cash/Check	Receipt Attached to Money:
Monitor who Received Form and Payment:		
Date Sent to New IQ:		

Sent by: _____