



EMERGENCY DOMICILE ENTRANCE AUTHORIZATION FORM

NAME _____

LOT# _____ ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

By signing this form, you hereby authorize Sierra Vista Mobile Home Village Management to enter your home in the event of an assumed or known emergency for the purpose of rendering whatever emergency service as appears to be necessary, then to notify the persons listed below.

IN CASE OF EMERGENCY PLEASE NOTIFY

1. NAME _____

ADDRESS _____

PHONE _____ RELATIONSHIP _____

2. NAME _____

ADDRESS _____

PHONE _____ RELATIONSHIP _____

OPTIONAL-RELIGIOUS ORGANIZATION TO NOTIFY

NAME _____

ADDRESS _____

PHONE _____ RELATIONSHIP _____

SIGNATURE OF AUTHORIZING TENANT _____

SIGNATURE OF AUTHORIZING TENANT _____

DATED THIS _____ DAY OF _____ YEAR OF _____