

Cloverplace Condominium Association, Inc.
Association Data Management
Frankly Coastal Property Management, LLC.
1400 Lake Tarpon Avenue
Tarpon Springs, FL 34689
Ph: 727-799-0031

Pool Key Release Form

All unit owners must complete and return this form to the board by email to info@cloverplace.org to receive a key card to the pool. Only one key card will be issued per unit. It is the responsibility of the unit owner to fill in the name of the tenant on this form and deliver the key card to a tenant. If a key card is lost, stolen or broken, contact Association Data Management for a replacement card and to deactivate your old card. The replacement card fee is \$20. If unit owner is more than 90 days past due on association fees, access to the pool will be revoked until all past due fees are paid.

Cloverplace Unit Address: _____

Phone Number: _____ Email: _____

Mailing Address (if different from above): _____

Name of Tenant (if applicable): _____

Select one: Access card Restroom key Both

Pool Rules as posted:

1. If you have a temperature or are coughing or feel sick.... DO NOT enter the pool area. Stay Home!
2. Wear a Face Mask to and from the pool area.
3. Practice staying 6 ft. from others who are not within your household and wear your mask when not in the water.
4. Please shower before entering Pool.
5. No beverages in pool or on pool wet deck. No alcoholic beverages.
6. No glass containers or breakable objects allowed.
7. No pets in fenced pool or pool area.
8. Owners/Residents are responsible for their children and guests.
9. Persons under 16 years old and younger are permitted in the pool provided they are accompanied by a parent, guardian, or adult over the age of 21.
10. No running, pushing, or obscene language.
11. Swim attire is required. (No thongs).
12. No skateboards, roller-skates, bicycles or scuba equipment.
13. No cooking permitted.
14. No diving.
15. Swim at your own risk.
16. Residents will be responsible for all damages.

Board of Directors reserves the right to deny use of the facilities to anyone. The pool is under surveillance.

Pool hours are from 8 AM to 8 PM. Pool capacity is 24 persons. There is no lifeguard on duty. If pool rules are not adhered to the pool will be closed again.

By my signature below, I acknowledge that I will respect and observe the pool rules and I will assure that my tenants or guests that accompany me to the pool will do the same. I understand that the keycard will be assigned to me and may not be shared with others.

Signature

Date

Print Name