

**Cardinal Lake HOA  
Request for Pool Key**

Owner Name: \_\_\_\_\_

Owner Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Unit Address if different from above: \_\_\_\_\_

\_\_\_\_\_

Is this a request for a second/replacement key? Yes \_\_\_\_\_ No \_\_\_\_\_ \$20.00  
(check enclosed)

Will this key be used by a renter of your home? Yes \_\_\_\_\_ No \_\_\_\_\_ (owner responsible for actions of tenant)

If so, please tell us their name(s) and phone number(s). ((Keys will be mailed to the Owner Mailing Address (above) only))

Tenants' Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Please make your check payable Cardinal Lake and send to:

CAS, Inc.  
PO Box 83  
Pinehurst, NC 28370

Date of Request: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year