

For Office Use Only:

Unit #: \_\_\_\_\_

Key #: \_\_\_\_\_

OCEANTREE CONDOMINIUM ASSOCIATION  
SERVICE AUTHORIZATION FOR ENTRY TO UNIT  
NOT FOR OVERNIGHT USE

The purpose of this form is to authorize entry to a Unit for: Maids, Deliveries,  
Tradespersons, Realtors, etc.

This Form may be revoked by Owner at any time.

This authorization is valid for no more than six (6) months.

NOTE: All spaces in part "A" must be filled in. If a space is not applicable  
write in (N/A) – (None) or (0)

**PART A** To be completed by the Unit owner. Lessees may use this form only during  
the term of the Lease

Authorization for entry to Unit # \_\_\_\_\_

Entry granted to:

1) Name of Company, Persons, etc. \_\_\_\_\_

2) Realtor – Listing Company \_\_\_\_\_

Multiple Listing ( ) Yes ( ) No

a) I authorize secondary agencies access to my unit

( ) Yes ( ) No

Purpose of entry: \_\_\_\_\_

Date or period of entry:

Single entry date: \_\_\_\_\_

Multiple entry dates (max 6 months) From \_\_\_\_\_ To \_\_\_\_\_

Key for Unit in possession of ( ) Front Desk

If other, who \_\_\_\_\_ Unit # \_\_\_\_\_

Phone # \_\_\_\_\_

Signature of Owner/Lessee

Print Name

Unit No.

Date

Return to: OCEANTREE, 3400 NORTH OCEAN DR, SINGER ISLAND, FL 33404 – FAX 561-845-0158

Or EMAIL: [oceantreesi@gmail.com](mailto:oceantreesi@gmail.com) Alternative: You may send email in lieu of this form.

**PART "B"** – To be completed by office:

Form received: Date \_\_\_\_\_ Reviewed by \_\_\_\_\_