

244 MADISON REALTY CORP.

Guest Pass

Apartment #

Guest Date(s) – 30 day maximum

I hereby authorize the following guest(s):

Print Name (s)

Relationship

“ Board Approval for Non-Immediate Family.

to occupy the above referenced apartment during the date(s) listed above and hereby accept full responsibility therefore.

“ I will be present during that time.

“ I will NOT be present.

Shareholder Signature

Shareholder Contact Number

Shareholder (Print Name)

Guest Cell Phone/Best Contact Number

Guest Permanent/Legal Address

(Building use only)

RECEIVED BY _____

DATE _____