

POTTINGER ST TERRACES
2-34 POTTINGER ST
FOB REQUEST FORM

USE OF POOL & GYM FACILITIES AT SHORE 6/7, 17A HICKSON ROAD

Date: _____

Apartment Number: _____

Name of Tenant/Resident: _____

Name Of Agent (If Applicable): _____

Number of FOB's Requested: _____

Please note that a Cheque or Money Order in the order of \$50 per fob is to be made payable to
Strata Plan 69546

Signature: _____

Concierge Signature: _____