

CLOVERPLACE CONDOMINIUM ASSOCIATION, INC.

Ameritech Property Management, Inc.  
24701 US HWY 19 N, Ste. 102  
Clearwater, Florida 33763  
Phone (727) 726-8000 Fax (727) 723-1101

**Pool Key Release Form**

All unit owners must complete and return this form to Ameri-tech by mail, fax or in person to receive a keycard to the pool. Only one keycard will be issued per unit. It is the responsibility of the unit owner to deliver the keycard to a tenant. If a keycard is lost, stolen or broken, contact Ameri-tech for a replacement card and to deactivate your old card. The replacement card fee is \$20. If a unit owner is more than 90 past due on association fees, access to the pool will be revoked until all past due fees are paid.

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

Cloverplace Unit Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing address (if different from above): \_\_\_\_\_

\_\_\_\_\_  
Name of Tenant (if applicable): \_\_\_\_\_

Pool Rules as posted:

1. Owners/Residents are responsible for their children and guests
2. Children 15 years old and younger are permitted in the pool until 11:00PM provided they are with a parent, guardian, or adult over the age of 21.
3. Swim attire is required. (no thongs)
4. Please shower before entering pool.
5. No pets in pool or pool area.
6. No glass or breakable objects allowed.
7. No running, pushing, or obscene language
8. No cooking permitted.
9. No alcoholic beverages.
10. No diving.

Pool hours are from 7AM to 11PM. Pool capacity is 21 persons. There is no lifeguard on duty. Swim at your own risk.

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