

BELLAVISTA VILLAGE

SOLE OWNER MEMBERSHIP CARD

(Please print when filling in the blanks)

I, _____ acknowledge that I am the sole owner of SUBDIVISION _____ BLOCK _____ LOT _____, Bella Vista Village, and am requesting a membership card for _____, and affirm that we are living together as a single family household. *(Must provide copy of Drivers License or Picture ID with same address as Property Owner in order to qualify for membership as stated in BP 3.06)*

It is understood that the additional card will **not be** automatically issued each year, but only upon request. It is further understood that in the event, at any time during the year, we no longer reside together as a single family household, the membership card issued to _____ will be returned to the Membership Services Department. It is also understood that as sole owner of the referenced property, only my

(Primary Owner) dependents are entitled to membership cards upon request.

Owners Signature

Date

Requests should be dropped off at Membership Services, 3 Euston Road or mailed to:

Bella Vista Village Property Owners Association

Attn: Membership Services

PO Box 6210

Bella Vista, AR. 72714

Phone: (479) 855-8000

Fax: (479) 855-8006

01/14/2014