

APPENDIX E

REQUEST FOR VISITOR PASSES



Parking Services
Lido Sands Community Association
P.O. Box 1373, Newport Beach, CA 92659

REQUEST FOR VISITOR PASSES

DATE _____

NAME _____

SIGNATURE _____

ADDRESS _____ LOT # _____

Office Use Only:

1. Date Received: _____

2. Date Sent: _____

3. Notes: