

Caretaker Authorization Form - Tenant

I (We) hereby authorize _____ to be the caretaker of my/our
Name of Caretaker

apartment _____. I understand that the General Manager/Staff will not issue keys to the apartment, or be responsible for staying in the apartment while the above name person is there.

The term of this authorization is from _____ to _____ .

_____ will have permission to:

Name of Caretaker

(Circle "Yes" or "No")

Authorize work to be done in my/our apartment. **Yes** **No**

Authorized to drive my vehicle on/off MVT property. **Yes** **No**

Check my mail box **Yes** **No**

Notes:

Caretaker's name: _____

Print name

Signature

Tenant's name: _____

Print name

Signature

Phone#: _____

Phone#: _____

Email Address: _____

Email Address: _____