



**RESIDENT AUTHORIZED**  
**GATE ACCESS REGISTRATION FORM**

Owner Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

**Business Information**

Name of Business \_\_\_\_\_

Business contact name \_\_\_\_\_

Business Phone # \_\_\_\_\_

Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

\*Only businesses registered with the State of Florida Division of Corporations will be allowed to be registered for authorized access.

\_\_\_\_\_

Vista Staff: \_\_\_\_\_

Sunbiz.org Verification:

Yes \_\_\_  
Date entered in Vista Admin \_\_\_\_\_

No \_\_\_  
Date called Owner to notify them \_\_\_\_\_