



SEPA Club Inc.
 Attn: Key Committee
 5448 Eight Mile Ranch Road, St. Cloud, FL 34773
SEPAKeys@gmail.com



KEY REQUEST FORM 2022

Keys are issued to property owners only upon payment of the key fee; one (1) key will be issued to each property owner, with a maximum of four (4) keys per 1 ¼ acre (+/-) lot: one key per owner per deed per parcel number. If a lot has been split into .31-acre (+/-) parcels, then one key per .31-acre parcel number can be issued, **no matter how many owners.**

PROVIDING CURRENT CONTACT INFORMATION WILL HELP ALLEVIATE ANY DELAYS IN PROCESSING
Please legibly PRINT the following information for each key requested (one sheet per property owner request):

Property Owner's Name*: _____

*For business owners, Requestor's Name and Title: _____

Mailing Address: _____

Telephone Number(s): _____ Email Address: _____

Please submit the following CURRENT items to purchase a KEY: (check off "x" as attached.) NO KEYS WILL BE ISSUED UNLESS LEGIBLE COPIES HAVE BEEN ATTACHED AND CAN BE RETAINED BY THE KEY COMMITTEE.

1. ___ Parcel Number: _____ Acreage: _____ Medeco Key # _____
2. ___ Legible copy of CURRENT PHOTO I.D. (valid driver's license, passport, or work badge) Exp Date: ___/___/___
3. ___ Legible copy of **RECORDED DEED** not property appraiser's sheet (**Book _____ and Page _____**) Month / Year
4. ___ PayPal, **Cashier** check (**no personal checks accepted**), money order, or Cash in the appropriate amount for **EACH** key ordered: Payable to SEPA CLUB INC. (Fee includes return certified mailing, sales tax, gate & lock maintenance.) **Sending cash through the mail can be risky. Please check appropriate option:**
 ___ I am replacing my old Medeco Key # _____, I've enclosed payment of \$30.00 (key # will be verified.)
 ___ I do not have a Medeco key for this parcel and I've enclosed payment of \$50.00
 ___ My key # _____ was lost/stolen. I have attached a Notarized Lost/Stolen Key form and payment of \$50.00
5. ___ Copy of current Annual Corporate Report from Sunbiz.org for business. (Requester's name must be listed)
- 5a. ___ Authorization letter from Corporate Officer for agent access. (Agent's name must be listed plus copy of photo ID)
6. ___ Legible copy of recorded Certification of Trust, listing any or all Trustee.

SEPA Club Inc is not responsible any lost, stolen, or misdirected mail.

DO NOT DELIVER PAPERWORK IN PERSON OR BY FED EX OR UPS.

This is mailing address only – we are not able to accept deliveries at this cluster mailbox.

DO NOT SEND any paperwork via Certified, Return Receipt Request as this will only delay us receiving your request because we must go to the Post Office (25 miles away) to pick it up.

MAIL to: SEPA Club Inc., ATTN: Key Committee, 5448 Eight Mile Ranch Road, Saint Cloud FL 34773.

ONLINE: Go to our website: www.SEPAClub.com to complete Key Request Form, upload documents, and submit payment via PayPal – **EMAIL Key requests to SEPAKeys@gmail.com**

Preferred method is pdf format when submitting your request and documents by email.

Keys are mailed out once a week (usually midweek) via U.S. First Class Certified Mail/Return Receipt Requested (signature is required). Multiple requests can be processed together as long as all documents are received.

PLEASE NOTE NEW PHONE NUMBER: 407-922-9922 (you can call or text this number)

PLEASE NOTE HOURS OF OPERATION: Mon-Fri 9 am - 7 pm; Sat 9 am – 2 pm; Sun Closed

Thank you.
 SEPA Club Inc.
 Key Committee

Links to government web sites for documents:

Property Appraiser: <http://www.property-appraiser.org>

Clerk of Court (copy of deed): <http://www.osceolaclerk.com/>

Tax Collector's Office (tax statement copy): <http://www.osceolataxcollector.com/>

OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE

Medeco Key # already assigned _____ **Abloy** Key No. _____ Date: _____

Amt Paid _____ CA / MO / CshrCk / PayPal / CC-Debit (last 4 of card) _____