



Ashbrooke Owners Association
Professionally Managed by HLNM

Ashbrooke Storage Portable ON Demand Storage Unit (PODS) Request Form

Name: _____

Address: _____

Email Address: _____

Phone Number: _____

Date of Request: _____

Date of Delivery: _____ Date of Removal: _____

By signing this form, I have read and understand the Ashbrooke Owners Association Inc.'s Portable On Demand Storage Units (PODS) Policy adopted September 11, 2013 by the Board of Directors. I also understand that I may only have the POD on my lot for only three (3) weeks within any running twelve (12) month period of time unless the Board of Directors grants relief from this rule in specific circumstances.

X

Property Owner