



# FORRESTAL HEIGHTS OVERNIGHT GUEST FORM

I, \_\_\_\_\_ resident of  
apartment # \_\_\_\_\_ hereby request the following overnight guest(s)  
(Forrestal Heights)

The home address of the guest(s) \_\_\_\_\_

This visit will be from (dates): \_\_\_\_\_ to \_\_\_\_\_

Vehicle Information: Check here if none

Plate # \_\_\_\_\_ Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_

I understand that this request is subject to the approval of management, the Lease/Rules and Regulations, and the Guest/Visitor Policy of the City of Beacon Housing Authority. I also understand that I am responsible for the actions of my guests

Tenant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## OFFICE USE ONLY

Approved:  Yes  No

Comments: \_\_\_\_\_

Housing Authority Representative: \_\_\_\_\_ Date: \_\_\_\_\_



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