

SUN MOUNTAIN RANCH CLUB & MEMBERSHIP ASSOCIATION  
KEYCARD REPLACEMENT REQUEST FORM

LOT OWNER NAME \_\_\_\_\_

SMRC LOT NUMBER \_\_\_\_\_

LOT OWNER PHONE \_\_\_\_\_

LOT OWNER EMAIL \_\_\_\_\_

LOST/STOLEN CARD NUMBER \_\_\_\_\_

CARD NUMBER(S) STILL IN POSSESSION \_\_\_\_\_

MAIL NEW CARD(S) TO \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

EMERGENCY PICK-UP

OF REPLACEMENT CARDS REQUESTED      CIRCLE ONE      (YES)      (NO)

REPLACEMENT FEE ENCLOSED      \$ 50.00 – 1 CARD REPLACED

\$100.00 – 2 CARDS REPLACED

MAIL FORM AND FEE TO:

SUN MOUNTAIN RANCH CLUB  
KEYCARD REPLACEMENT REQUEST  
PO BOX 1227  
WINTHROP, WA 98862

DIRECT QUESTIONS TO:

[TREASSMRC@GMAIL.COM](mailto:TREASSMRC@GMAIL.COM)