

CRESTWOOD VILLAGE SIX COMMUNITY ASSOCIATION

DEERFIELD HALL

6 CONGASIA ROAD

WHITING, NEW JERSEY 08759

ADMINISTRATIVE OFFICE: (732) 350-2656

FAX NO.: (732) 350-2838

EMAIL: crestwood6@comcast.net

WEBSITE: www.crestwoodvillage6.com

It is time to update the Emergency Snow Removal List. For your name to be entered on the list, you must qualify for one of the items listed below and your doctor must sign the form. This form must be submitted annually.

Note: If you check **Other**, your doctor must explain the type of Life-Sustaining Service(s) that you are receiving.

PRIORITY MEDICAL SERVICE CERTIFICATION

Board of Trustees
Village VI
6 Congasia Road
Whiting, NJ 08759

This is to certify that the person(s) listed below are under my medical care, and I certify that they require the following medical services as indicated, which are not additional services, but that of a priority.

- ☐ Radiation, Dialysis or Chemotherapy Treatment (must provide day and time of treatments)
- ☐ Other (Please explain type of Life-Sustaining Services required)
(must provide day and time of treatments/service)

PLEASE PRINT CLEARLY

Doctor's Signature

Date

Resident's Name

Date

Address

Address

Phone Number

Phone Number