

① This section to be completed by the Owner

Owner's Information & Certification:

Property Address: _____

Mailing Address: _____

Last Name: _____ First Name: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

Fax: _____ DL# _____ State _____

I certify that the below applicants are ___ occupants ___ tenants in my property. I understand that gate entry devices are not transferable & must notify Association within 3 days of any person vacating the property.

Signature X _____ Date: _____

② Telephone number to be programmed in front gate system for visitors

Directory Information: Home Phone: _____

Last Name: _____ First Name: _____

③ Occupant/Tenant Information:

Last Name: _____ First Name: _____

DL# _____ State _____

Last Name: _____ First Name: _____

DL# _____ State _____

Last Name: _____ First Name: _____

DL# _____ State _____

**Gate Remotes are \$30.00 and Pedestrian Gate Key Fobs are \$10.00.
Make checks payable to: Floridian Isles Townhomes**

OFFICE USE ONLY

REMOTE # _____

REMOTE # _____

REMOTE # _____

REMOTE # _____

REMOTE # _____

KEY FOB # _____

KEY FOB # _____

KEY FOB # _____

KEY FOB # _____

KEY FOB # _____

KEY FOB # _____

IMPORTANT: KEEP RECORD OF THE REMOTE NUMBERS FOR FUTURE REFERENCE.

The Gate Entry System is a security device !

Tailgating through, tampering with, touching, or breaking the gate is a violation for which you will be charged and penalized. Trespassing, hit and run, and destruction of private property will be prosecuted.