



SECURITY ALARM AGREEMENT

ALARM FEE: \$100.00* DATE ALARM FEE PAID: _____

(*includes four (4) false alarms; all subsequent false alarms are subject to a fine of \$75 for the 5th false alarm and increasing by \$25 increments thereafter)

NAME: _____

PHYSICAL ADDRESS: _____

MAILING ADDRESS: _____

HOME PHONE: _____ CELL: _____ OTHER: _____

WHO TO CALL IN CASE OF EMERGENCY: _____

EMERGENCY CONTACT TELEPHONE #: _____

NAME OF ALARM COMPANY: _____

ALARM CO. TELEPHONE #: _____

ALARM CODE IN CASE OF EMERGENCY: _____

DO YOU HAVE A SET OF KEYS AT THE ADMIN OFFICE? _____

PLEASE NOTIFY THE ADMINISTRATION OFFICE OF ANY PERSON ENTERING THE RESIDENCE AND USING THE ALARM CODE.

DATE: _____

Member Signature