

## APPLICATION FOR ADDITIONAL SECURITY DEVICES

\ nalicetic	s - Strata Plan No	0			
Applicatio	on Details:	•			
Address of	Building				
Name					
Position <b>ow</b>	ner tenant	agent			en authority from the owner or your an additional key/swipe/remote;
Telephone			Unit N	D.	
Additiona	l Details:	•			
How many s	security keys/rem	note controls	do you cur	rently have?	
Specify if yo	ou are requesting	g a key/remo	te/swipe	Key Re	mote Swipe
How many o	additional securit	y keys/remot	te/swipes o	are you reque	esting?
Is this reque	est an additional	or replacem	ent?		
What level	do you require ac	ccess to?			
How many k	oedrooms do you	have?			
How many o	allocated car spa	ces/garages	do you ha	/e?	
How many r	residents are occ	upying your l	ot?		
Who is on the	he lease agreeme	ent? (if tena	nted)		
Provide a re	eason for why you	u require add	ditional sec	urity keys/re	mote controls.
nternal P	rocessing:				
	ager approval				
Strata Mana					
Strata Mana					
				Date	
Name				Date	
Name Signature	dditional security	request or a	replaceme		
Name Signature Is this an ac	dditional security ata Committee a	·	•		No N/A
Name Signature Is this an act	·	pproved the	request?	ent request?	No N/A
Name Signature Is this an act Has the Stro	ata Committee a	pproved the	request?	ent request?	No N/A
Name Signature Is this an act Has the Stro	ata Committee a rect fee been pro curity access key	pproved the	request?	ent request?	No N/A
Name Signature Is this an act Has the Stre Has the cor Date the se Receipt Nur	ata Committee a rect fee been pro curity access key	pproved the ocessed? \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	request?  /es N s collected	Yes  N/A	



## **Log** Sheet:

## Internal use ONLY

Date Log Details					