

MORNINGSIDE SECURITY

Confidential Personal Data

(Please print or type)

The information given on this form is confidential and will not be disseminated to anyone other than authorized Security Personnel, in the performance of their assigned duties, as authorized by the Morningside Community Association.

Date: _____

HOMEOWNERS

Owner #1	Morningside Address:		
Alternate Add:		Phone:	
		Bus. Phone:	
Abort Code:		Alt. Phone:	
Owner #2	Name:	Spouse's Name:	
Alternate Add:		Phone:	
		Bus. Phone:	
Abort Code:		Alt. Phone:	
Owner #3	Name:	Spouse's Name:	
Alternate Add:		Phone:	
		Bus. Phone:	
Abort Code:		Alt. Phone:	
Owner #4	Name:	Spouse's Name:	
Alternate Add:		Phone:	
		Bus. Phone:	
Abort Code:		Alt. Phone:	

RESPONSIBLE PARTY

*Responsible Parties should be limited to one (1) person, and an alternate. The RP should be a person who has the authority to act on behalf of the homeowner, including authority to make decisions regarding repairs and expenditures when necessary, during the homeowners' absence. **Do not list contractors or service personnel in this section!**

Name:	Phone:	Abort Code:
Alt. Name:	Phone:	Abort Code:

PERMANENT GUESTS

*Persons listed in this category are family members, extended family members, or friends who visit on a regular basis and may be issued a pass and granted access to Morningside at anytime, or granted a SLI (Security Let In) if the homeowner authorizes.

Name	Phone	Relationship	SLI (yes or no)

PERMANENT GUESTS CONTINUED

Name	Phone	Relationship	SLI (yes or no)

CONTRACTORS, VENDORS & SERVICE PERSONNEL

*Authorized repair and/or services personnel who provide service on a regular basis to your residence:

Name	Phone	Service	SLI (yes or no)

Do you wish Security Personnel to have access to your residence for non-emergency services?

Yes _____ No _____

Have you provided your keys to Security?

Yes _____ No _____ No. of Keys _____

I understand that, in accordance with my contract, even though access to my residence will be given only to authorized personnel, neither Morningside nor their contracted security provider, Inc. accepts any liability whatsoever for access or keys to my property.

Name of Officer Receiving

Homeowner Signature

*Please notify Security of any changes in addresses, phone numbers, or other pertinent information as soon as possible. Security can be reached 24 hours per day at (760)328-0555.