



Key Retention Program:

I wish to participate in the extra key retention program established by the Galena Territory Association for the convenience of the property owners. It is my intention that a duplicate key to my premises be retained in the office of the Association or Security office and be given to any guest, tradesman, or any other person who I want to have access to my house or living unit in my absence.

The following are the persons who will request the key on a regular basis and will need no further authorization from me except that proper identification is furnished to the Association representative in charge.

1 _____	8 _____
2 _____	9 _____
3 _____	10 _____
4 _____	11 _____
5 _____	12 _____
6 _____	13 _____
7 _____	14 _____

All other requests for my duplicate key must be accompanied by a written request signed by either the property owner or his or her spouse as listed on the association records. Such a request shall specify the length of time that the key will be used and when it is to be returned. When it is impractical for the authorization to be given in writing, my request may be made by telephone to the Association Manager, or in his absence his designated assistant or the acting Chief of Security on duty. An access code number will be assigned to me for use in making telephone authorizations.

I understand that the key is to be returned to the Association office when the need for the key is satisfied.

I understand that the key retention program is being initiated at the request of the members and is solely an accommodation and convenience for the members. I agree that I will not hold the Association, or any of its agents or employees liable for any misuse, damage, theft from the premises or any other act, either intentional or unintentional, caused while the key is out of the Association's control.

The participating property owner agrees to assume full and complete responsibility for any acts or damage done as a result of this program.

I also understand that I can withdraw from this program and obtain the return of my duplicate key upon giving the Association thirty days notice in writing. An annual fee for this service will be determined by the Board of Directors. No refunds are permitted.

The Association and its employees and agents will use reasonable care and prudence in ascertaining the identity of the person requesting the key, but the Association is not responsible for any fraud, deceit or misrepresentation in obtaining the key.

I agree to all of the above conditions and wish to participate in the retention service offered by the Galena Territory Association.

Access Code (1 letter and 4 numbers) _____

Name: _____

Unit & Lot Number: _____ Territory Address: _____

Home address: _____

City: _____ State: _____ Zip: _____ Home Phone: _____

Cell Phone: _____ Work Phone: _____ Galena Phone: _____

Email: _____

Owner Signature: _____ Date: _____