**BELMERE RFID TAG APPLICATION**

**Section A: Owner/ Resident**

Resident Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section B: Vehicle Information**

Make\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Model\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year\_\_\_\_\_ Color\_\_\_\_\_\_\_\_\_\_\_\_ Tag\_\_\_\_\_\_

Make\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Model\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year\_\_\_\_\_ Color\_\_\_\_\_\_\_\_\_\_\_\_ Tag\_\_\_\_\_\_

Make\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Model\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year\_\_\_\_\_ Color\_\_\_\_\_\_\_\_\_\_\_\_ Tag\_\_\_\_\_\_

Make\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Model\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year\_\_\_\_\_ Color\_\_\_\_\_\_\_\_\_\_\_\_ Tag\_\_\_\_\_\_

**Section C: Required Supporting Documentation**

1) Divers license showing residence address in Belmere.

2) **For each vehicle to be issued an RFID tag:** Florida vehicle registration showing address in Belmere

**Section D: Access control use only**

Vehicle 1: TAG ID\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Vehicle 2: TAG ID\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vehicle 3: TAG ID\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Vehicle 4: TAG ID\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NOTE 1**: RFID tags will be **PERMANENTLY** affixed to each vehicle issued a tag.

**NOTE 2**: RFID tags are the property of Belmere Homeowners Association and can be deactivated.

**NOTE 3**: RFID tags are for the sole and exclusive use of Belmere residents only!

**NOTE 4**: the cost for each RFID tag is $15.00.

I hereby certify that the information in Sections A & B is complete and accurate, and that true and accurate copies of the requested documents are attached hereto. I understand that I am responsible for all persons using an RFID tag assigned to me.

Resident Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_