O.O. (Old Orchard) Community Association, Inc.

Community Access Form

Please complete the following form to make changes to the access control system for your community. Check the corresponding box and fill out all information so that we can best serve you while keeping access to the community controlled. Please remit competed form to:

Crest Management 17171 Park Row Suite 310 Houston, TX 77084 E-mail: RachaelES@Crest-management.com

0.0	D. (Old Orchard) Community Association, Inc.				
Co	nmunity Association				
Owner's First Name		Last Na	Last Name		
Pro	perty Address				
Ma	iling Address (if different)				
Telephone		E-Mail A	E-Mail Address		
	Guest Directory (OPTIONAL)				
	Include me in the guest directory (please cire	cle one):	YES	NO	
	Telephone number: (this is generally the telephone number at the residence) The directory is an optional feature that uses your existing telephone to let you talk with visitors and allow them access to the neighborhood if you so desire. The system will keep your number confidential. Visitors call you from the callbox directory, Press 9 on your phone for at least 1 second to grand access.				

Entrance Gate Code (OPTIONAL)

Provide me with a gate code: YES NO *Crest Management will respond to you, with your assigned gate code.

□ <u>Remote Opener Request</u>

Remote gate openers are available upon request for a fee of \$55.00 per opener. Upon receipt of payment, a Board Member will be in touch with you to provide you with your remote.

Quantity Desired: ______ X \$55.00 Total for requested remotes ______

Payment can be by Check (made out to O. O. Community Association, Inc.)or Money Order.

Remotes will be mailed from Crest Management when payment has been processed.

If you received remotes from the previous owner, please list the 5-digit code on the back each remote so that the remote is registered to you.:

Signature (Owner)

Date