

ORDER ACCESS DEVICE FORM

In order to expedite the issuing of access control device(s) it is recommended that you complete the details below so we can issue or have ready the access device(s) for mailing or collection.

Contact Details

Date: _____

Name: _____ (Owner/Agent/Tenant)

Signature: _____

Strata Plan Number: _____ Lot Number: _____ Unit Number: _____

Address: _____

Phone Number: _____ Mobile: _____

Access Device Details: -

Access Device Type: _____ (Fob tag/garage

remote/swipe card etc) Access Location:

(Block/Stairwell/Garage etc) Quantity:

Please email this form to info@strataonly.com.au