

**Hillsborough Collection Master Association
Security Gate Authorization Form**

Homeowner Information:

Property Owner's Name: _____

Property Address (site address): _____

Mailing Address (if different): _____

Phone #: _____ (Phone number to be dialed by gate system)

Resident Information for Gate Listing (if different from above):

Name: _____

Phone #: _____ (Phone number to be dialed by gate system)

I, _____, hereby authorize So Cal Property Enterprises, or a board approved vendor, to program the above information into the gate entry system.

Homeowner Signature

Date

Print Homeowner Name

Resident Signature (if different from above)

Date

Print Resident name

Please mail, fax, or email to our office:



So Cal Property Enterprises, Inc. • 1855 Sampson Ave • Corona, CA 92879
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