

**HAWKS POINTE ASSOCIATION
Security Gate Authorization Form**

NEW REQUEST
 UPDATE/CHANGE

Homeowner Information:

Property Owner's Name: _____

Property Address (site address): _____

Mailing Address (if different): _____

Gate Directory Phone Number to be Programmed: _____

Contact Phone Number (if different): _____

Resident/Tenant Information (if different from above):

Name: _____

Address: _____

Phone #s: _____

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/Tenant Signature (if different from above)

Date

Print Resident/Tenant Name

OFFICE USE ONLY

Directory Gate Code: _____ Access Code: _____ Date: _____