PALM FRONT GATE REMOTE(S) AND GATE CODE ASSIGNMENT REQUEST

Submitte	d By:	Date:	
Unit:	Phone:	email:	
	_l am request	gfront gate remote(s) for a total cost of \$	
Fee Requ	ired for purch	se of Gate Remote \$25 each (Please make check payable	to
The Park	at Lost Mount	n, mail request form and check to Kevon Oliver, 2675 Pace	S
Ferry Roa	id, Suite 125, A	anta, GA 30339. Once the remote is activated, the	
Associatio	on Manager wi	contact you with additional instructions)	
		ng the required 4-digit code of (Please email th	1e
request fo	orm to <u>kevonol</u>	rer@fieldstonerp.com or mail to Kevon Oliver, 2675 Paces	
Ferry Roa	d, Suite 125, A	anta, GA 30339. Once the security company adds the code	? to
the syster	m, the Associat	on Manager will contact you with additional information)	
Should yo	ou have question	ns regarding the remote purchase or code assignment plea	ase
		at 404-920-8621, ext. 128 or email	
kevonoliv	er@fieldstone	o.com	
*****	******	******BOARD USE ONLY**************	
I have rec	ceived	roperly functioning remote(s).	
Homeowi	ner Signature:		
	-	Date:	
Security/0	Operations Cha	rperson Signature:	
		Date:	