

**Application for Vehicle Gate Access**

Name (Please Print): \_\_\_\_\_ Owner? \_\_\_\_\_ Tenant? \_\_\_\_\_

Property Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

**ATTENTION NEW OWNERS:**

Did you close on your home in the last 30 days? \_\_\_\_\_ Close Date: \_\_\_\_\_

**NOTE:** Please provide a copy of your closing disclosure or deed to showing you as the new buyer to [amenityaccess@goodwintx.com](mailto:amenityaccess@goodwintx.com) along with this request form to avoid any delay in processing your request for access.

**CHARGE POLICY:** Each RFID tag for vehicle gate = \$25.00. Any charges will be billed to your HOA account.

I am requesting a (indicate number of devices): **Gate Entry Tags** \_\_\_\_\_

**DELIVERY OPTION – Check One:**

Please **MAIL** the device(s) to the following address: \_\_\_\_\_

I will **PICK UP** the device(s) at 11950 Jollyville Rd., Austin, TX 78759 between 8:30 am – 5:30 pm, Monday through Friday. The device will be placed in the pick-up basket located at the front desk.

I have **ALREADY RECEIVED** an entry device(s) from: \_\_\_\_\_

The number(s) on the device(s) I have received are: \_\_\_\_\_

**CALL BOX/GUEST DIRECTORY ENTRY AND ACCESS CODES**

**Phone number for guest access directory (call box):** \_\_\_\_\_ (Leave blank if you do not wish to be in the directory/call box.)

**4-digit personal entry code:** \_\_\_\_\_ (Last 4 digits of your phone number)

Please read and complete the “Application/Agreement to Use Association Amenities and Release of Liability” on the following page. If you are a tenant, the owner must sign your request.

**Please return this form and the Application/Agreement to:**

Fax: (512)346-4873

Email: [AmenityAccess@goodwintx.com](mailto:AmenityAccess@goodwintx.com)

Mail: 11950 Jollyville Rd.

Austin, TX 78759-5227

**Application/Agreement to Use Association Vehicle Gate(s) and Release of Liability**  
**Vehicle Gate Access**

**Association:**  
**(ALLT) Lakecliff on Lake Travis Property Owners Association, Inc.**

Applicant hereunder represents to be the property owner and by his/her signature below acknowledge and accept the terms and conditions contained herein. After Applicant has signed this Application and Agreement, Applicant should make a copy for his/her personal files. Should a copy of this agreement be required at a later time please contact Goodwin & Company, (512) 502-7515 or email [AmenityAccess@Goodwintx.com](mailto:AmenityAccess@Goodwintx.com) to request a copy.

In consideration of being provided access to any of the Association's vehicle gate(s), Applicant hereby agrees that the use of said vehicle gate(s) is at the sole risk of Applicant, Applicant's family, Applicant's guests, Applicant's tenants, Applicant's invitees, or anyone for whom Applicant facilitates access to said vehicle gate(s).

**APPLICANT, ON BEHALF OF HIMSELF, HIS EMPLOYEES, REPRESENTATIVES, HEIRS AND ASSIGNS, AND ON BEHALF OF ANY PERSON UTILIZING THE ACCESS GRANTED TO APPLICANT HEREUNDER, HEREBY AGREES TO INDEMNIFY, DEFEND, AND HOLD HARMLESS THE ASSOCIATION, GOODWIN & COMPANY, THE ASSOCIATION'S AGENTS, EMPLOYEES, AND CONTRACTORS, FROM AND AGAINST ANY AND ALL CLAIMS, DEMANDS, CAUSES OF ACTION, AND/OR LIABILITIES, INCLUDING WITHOUT LIMITATION CLAIMS OF NEGLIGENCE, GROSS NEGLIGENCE, AND PREMISES LIABILITY, ASSOCIATED WITH THE USE OF THE ASSOCIATION'S AMENITIES BY APPLICANT, APPLICANT'S FAMILY, APPLICANT'S GUESTS, APPLICANT'S TENANTS AND THEIR GUESTS, APPLICANT'S INVITEES, OR ANYONE FOR WHOM APPLICANT FACILITATES ACCESS TO SAID AMENITIES. FURTHER, APPLICANT REPRESENTS S/HE HAS THE AUTHORITY TO PROVIDE THIS RELEASE ON BEHALF OF ALL PERSONS INDICATED HEREIN AND UNDERSTANDS THAT THE ASSOCIATION AND GOODWIN & COMPANY ARE RELYING ON THIS REPRESENTATION IN PROVIDING THE ACCESS INDICATED HEREIN.**

For purposes of this paragraph, the term "Applicant" shall be deemed to be Applicant, Applicant's family, Applicant's guests, Applicant's tenants and their guests, Applicant's invitees, and anyone for whom Applicant facilitates access to said vehicle gate(s). Applicant agrees to provide a copy of this Application and Agreement (including any attached additional rules/regulations) to any tenant of Applicant and to have tenant agree to abide by all provisions required of Applicant.

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I have read and agree to the terms and conditions described on the "Application/Agreement to Use Association Amenities and Release of Liability."

**OWNER SIGNATURE (Required):**

\_\_\_\_\_ DATE: \_\_\_\_\_

**TENANT SIGNATURE – IF APPLICABLE:**

\_\_\_\_\_ DATE: \_\_\_\_\_

**(Note: Owner must sign all requests)**