



GATE TRANSMITTER / AMENITY FOB

REGISTRATION/ACTIVATION

Please complete the following form for the CDD and return to the CDD.

_____ homeowner/tenant** at
Name of homeowner/tenant *(circle one)*

_____ .
Harborage address of homeowner/tenant

Phone number: _____

Email address: _____

**If tenant, homeowner's name _____

Transferred Gate Transmitter(s) – Please write the 5 digit number from the white sticker

- # _____ active / please activate *(circle one)*
- # _____ active / please activate *(circle one)*
- # _____ active / please activate *(circle one)*

Transferred Amenity Fob(s) – Please write the first 5 digits from the number

- # _____ active / please activate *(circle one)*
- # _____ active / please activate *(circle one)*
- # _____ active / please activate *(circle one)*