



**YOUR APPLICATION CANNOT BE PROCESSED WITHOUT PROVIDING ALL THE FOLLOWING ITEMS:**

**CHECKLIST**

- PAYMENT FOR AMTECH STICKERS**
- CLOSING STATEMENT / LEASE AGREEMENT (COPY)**
- COPY OF VEHICLE REGISTRATION**
- SIGNATURE ON FORMS**



Dear New Homeowner,

I would like to welcome you to Laurel Springs! We are excited that you have made the decision to become part of this exciting community! To get started, please complete the Residential Information package that is attached. This information is needed to create your profile which is entered in our database that is accessed only by Laurel Springs Homeowner Association and Security personnel. We consider your e-mail address and any personal information you provide to be private and this information will be kept strictly confidential. If you need to update your profile, or make any changes, go to the Main Gate and request an update form. You will also be issued a User id and Password to access your security profile online in which you can add daily or permanent visitors to your list. All requested changes to your profile must be submitted in writing on a Residential Update form or online thru your security profile. You can go directly to your profile by going to <https://www.gatekey.com/resident-login.html> to enter your user name and password. Upon receiving your completed package, you will be contacted within 24-48 hours regarding your scheduled orientation meeting time at the Resident's Clubhouse with the Property Manager and Director of Security. Orientations are held on Tuesdays at 11:30am and Thursdays at 2:00pm.

If you have any questions regarding the community security program, please do not hesitate to contact me at 770/844-0175 or [security@laurelspringshoa.com](mailto:security@laurelspringshoa.com). Be sure to review the form to attend a Security Orientation meeting. If you have any questions regarding the security staff or any security concerns, you can contact the Chief Security Officer; James Wilson at 770/ 844-0071. On the behalf of the entire Security & Safety Department, we welcome you to Laurel Springs and look forward in serving you!

Best Regards,

Christopher Sanders, CHS

Laurel Springs HOA

Director of Security

**\*COPY OF THE 1<sup>ST</sup> PAGE OF CLOSING STATEMENT MUST BE ATTACHED IN ORDER TO PROCESS\***

**LAUREL SPRINGS**



LEASING PROPERTY

*(LEASE AGREEMENT MUST BE ATTACHED)*

PURCHASED PROPERTY

*(CLOSING STATEMENT MUST BE ATTACHED)*

**RESIDENT INFORMATION**

RESIDENT FULL NAME: \_\_\_\_\_

SPOUSE NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

LOT#: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ (HUSBAND)

HOME FAX: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ (SPOUSE)

EMAIL ADDRESS(HUSBAND): \_\_\_\_\_

SPOUSE: \_\_\_\_\_

DO YOU WANT TO RECEIVE SECURITY ALERTS & NOTICES VIA EMAIL?  YES  NO PLEASE ISSUE ME A FITNESS ROOM KEY:  YES  NO

EMPLOYER: \_\_\_\_\_

OFFICE PHONE: \_\_\_\_\_

SPOUSE'S EMPLOYER: \_\_\_\_\_

OFFICE PHONE: \_\_\_\_\_

**EMERGENCY CONTACT MUST BE ENTERED BY LOGGING IN TO YOUR ONLINE SECURITY PROFILE.  
ENTER THE FOLLOWING INFORMATION WHEN LOGGING IN: NAME, RELATIONSHIP, PHONE NUMBER**

**PLEASE LIST ALL CHILDREN'S NAMES AND DATE OF BIRTH:**

NAME	DATE OF BIRTH	Male / Female
_____	_____	<input type="checkbox"/> M <input type="checkbox"/> F
_____	_____	<input type="checkbox"/> M <input type="checkbox"/> F
_____	_____	<input type="checkbox"/> M <input type="checkbox"/> F
_____	_____	<input type="checkbox"/> M <input type="checkbox"/> F
_____	_____	<input type="checkbox"/> M <input type="checkbox"/> F
_____	_____	<input type="checkbox"/> M <input type="checkbox"/> F

**PLEASE ENTER ALL FREQUENT VISITORS INTO YOUR GATEKEY PROFILE**

**YOU MUST LOG IN TO YOUR ONLINE SECURITY PROFILE. LOGIN INFORMATION AND PASSWORD WILL BE GIVEN AT YOUR ORIENTATION.**

**YOU MUST LIST AND REGISTERED ALL OWNED VEHICLES**

YEAR	MAKE	MODEL	COLOR	LICENSE PLATE#
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**30-Day Amtech Activation Until Valid Tag is Validated**

**REQUEST FOR 1 FITNESS ROOM KEY:  YES  NO, THANK YOU  ADD 1 EXTRA KEY FOR \$5.00**



# AMTECH TAG / AUTO DECAL REQUEST FORM



Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_ Lot #: \_\_\_\_\_

Vehicle Description: **PROOF OF OWNERSHIP MUST BE PROVIDED. Insurance or Registration Card.**

Year	Make	Model	Color	Tag#

Year	Make	Model	Color	Tag#

Year	Make	Model	Color	Tag#

Reason For Request:( *Check One*)  NEW VEHICLE  PARENT:(Name)\_\_\_\_\_

LOST AMTECH CARD: List all card numbers in your possession, lost card will be removed.

(REQUIRED) LRL100 \_ \_ \_ , LRL100 \_ \_ \_ , LRL100 \_ \_ \_ , LRL100 \_ \_ \_ , LRL100 \_ \_ \_

OTHER: \_\_\_\_\_

I TRANSFERRED MY CURRENT DECAL TO MY NEW VEHICLE WINDSHIELD: DECAL# \_\_\_\_\_

Please delete the following vehicle(s) from my database: \_\_\_\_\_

**Amtech tags and decals are for the USE of Residents only. Laurel Springs Decals and Amtech cards will be confiscated from all unauthorized Non-Residents and escorted off property. Unauthorized distribution of Amtech cards and Decals to guests or contractors can result in Amtech tag(s) suspension and fine assessed for violation. Amtech tags cannot be transferred between residences or vehicles. Tag must remain with vehicle it was assigned too. Payment must be submitted prior to request being processed. Make check payable to Laurel Springs HOA. Removal of Amtech windshield tag voids 1yr warranty from the Laurel Springs HOA. Removal of Amtech tag from windshield automatically destroys tag.**

<u>ITEM</u>	<u>PRICE</u>	<u>QTY</u>
Access Tag	\$25.00 per Residential Vehicle (non-refundable)	_____
Laurel Springs Decal	FREE for Property Owner Residential Vehicle	_____

Payment Method:  Check  Credit Card-TYPE: \_\_\_\_\_

*I UNDERSTAND THAT THE AMTECH CARD CAN BE REVOKED OR SUSPENDED UPON THE DISCRETION OF THE HOA. I WILL TURN IN MY DECAL AND AMTECH CARD IN THE EVENT THAT I MOVE FROM THE COMMUNITY OR SELL MY VEHICLE. I UNDERSTAND THAT I NEED TO PROVIDE PROOF OF OWNERSHIP AND BRING MY VEHICLE TO SECURITY PRIOR TO RECEIVING MY DECAL OR AMTECH CARD. I FURTHER UNDERSTAND THAT THE AMTECH TAG ASSIGNED TO MY VEHICLE MUST REMAIN WITH THE VEHICLE. I CANNOT TRANSFER IT TO ANOTHER RESIDENCE OR VEHICLE WITHOUT APPROVAL FROM HOA.*

Resident Signature \_\_\_\_\_ Date \_\_\_\_\_

Amtech Cards: \_\_\_\_\_ Issuing Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Decal(s): \_\_\_\_\_ Issuing Officer: \_\_\_\_\_

# Pet Information

Pet Owner's Name: \_\_\_\_\_

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

Tel # : \_\_\_\_\_

## PET #1

Collar or Tags?  Yes  No

Vaccinated?  Yes  No

Name of Pet:

Type of Pet:

Color of Pet:

Age & Weight:

## PET #2

Collar or Tags?  Yes  No

Vaccinated?  Yes  No

Name of Pet:

Type of Pet:

Color of Pet:

Age & Weight:

**GEORGIA LAW AND COMMUNITY POLICY REQUIRES YOUR DOG TO BE ON A LEASH AT ALL TIMES WHEN WALKED**

**Always inform Security if your pet is a new addition to your family. Security is here to ensure the safety of all your family.**

**Your pets will thank you too!**

**Please read the Rules and Policies regarding pets. Fines may incur for violations of these Rules and Policies.**

[ATTACH PICTURE]

OPTIONAL



# *Laurel Springs*

## **GARAGE DOOR NOTIFICATION REQUEST**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

PLEASE ADD MY RESIDENCE TO YOUR NOTIFICATION LIST. I UNDERTAND THAT A CALL MAY BE PLACED TO THE PRIMARY NUMBER ON FILE BETWEEN THE HOURS OF 10:00PM-5:00AM, IN THE EVENT MY GARAGE DOOR IS LEFT OPEN. I ACKNOWLEDGE THAT THIS IS A COURTESY NOTIFICATION ONLY.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*



## WAIVER OF LIABILITY

I hereby authorize representatives of the current contracted security services, Allied Universal or any contracted security services retained by Laurel Springs Homeowner Association any reasonable access to my property for the purpose of responding to reports of emergencies, intrusions alarms, medical calls and fire alarms to observe, assist, report and deter harm to property and life. The Laurel Springs Homeowner Association currently has no agreement or contract covering the response of security officers to private residential property. Allied Universal does not guarantee a response nor the timelines of a response to my property for said incidents.

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Full Name (Print)

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Address

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Signature

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Date