

BATTERY/SMOKE ALARM ORDER FORM

Last Name _____ First Name _____ Unit # _____

Device Type

Cost

- Smoke Alarm Batteries # _____ _____
- Smoke Alarm Batteries and Installation # _____ _____
- Smoke Alarms # _____ _____
- Smoke Alarms and installation # _____ _____

Payable by Check or Money Order Only

Total Amount Due _____

Resident Signature _____ **Date:** _____

| #of Batteries | Cost | Installation | Amount to Collect |
|---------------|----------|--------------|-------------------|
| 1 | \$ 6.00 | \$ 3.00 | \$ 9.00 |
| 2 | \$ 12.00 | \$ 6.00 | \$ 18.00 |
| 3 | \$ 18.00 | \$ 9.00 | \$ 27.00 |
| 4 | \$ 24.00 | \$ 12.00 | \$ 36.00 |
| 5 | \$ 30.00 | \$ 15.00 | \$ 45.00 |
| 6 | \$ 36.00 | \$ 18.00 | \$ 54.00 |

| # of Smoke Alarms | Cost | Installation | Amount to Collect |
|-------------------|----------|--------------|-------------------|
| 1 | \$ 22.00 | \$ 3.00 | \$ 25.00 |
| 2 | \$ 44.00 | \$ 6.00 | \$ 50.00 |
| 3 | \$ 66.00 | \$ 9.00 | \$ 75.00 |
| 4 | \$ 88.00 | \$ 12.00 | \$100.00 |
| 5 | \$110.00 | \$ 15.00 | \$125.00 |
| 6 | \$132.00 | \$ 18.00 | \$150.00 |

FLORENCIA BATTERY/SMOKE DETECTION INSTALLATION AUTHORIZATION

I/We consent to the Association:

_____ Installing Ultralife Lithium 9V batteries at a cost of \$ _____

_____ Installing Smoke Alarms at a cost of \$ _____

The Association installs replacement batteries and smoke alarms as a convenience to owners. By signing below, I/We agree to save and hold harmless the Association, its officers, directors, members, agents and employees from any claims arising out of the performance of the batteries and smoke alarms, including, without limitation, attorney's fees and costs.

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| Units 01/06 Have 6 smoke detectors |
| Units 02/03/04/05 Have 5 smoke detectors |

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|---|
| Check or Money Order Only Payable to: Florenxia |
|---|

Print Name: _____

Unit _____

Date: _____