

Apartment Number: \_\_\_\_\_

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_ Between these dates, you and your party will be responsible for all activity associated with the access cards issued to this apartment and you may receive calls/text/emails about building-related issues such as water leaks, water shutoffs, window cleaning and pest control schedules, etc. You will only receive these messages between your arrival and departure dates.

# FOSTER TOWER REGISTRATION FORM

**A**

### OWNERS:

(1) Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Cell: \_\_\_\_\_  
  
(2) Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Cell: \_\_\_\_\_  
  
Address: \_\_\_\_\_  
\_\_\_\_\_

### ON-ISLAND MANAGING AGENT: (required by law for all absentee owners)

Realtor License #: \_\_\_\_\_  
Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Email: \_\_\_\_\_

### EMERGENCY ACCESS TO APARTMENT:

Please note below your representatives who will hold keys to your apartment. In case management is unable to contact you, these representatives will be asked to provide access to your apartment, in the event of an emergency or threat of loss to your unit.

(1) Name: \_\_\_\_\_  
Tel.: \_\_\_\_\_  
Email: \_\_\_\_\_  
  
(2) Name: \_\_\_\_\_  
Tel.: \_\_\_\_\_  
Email: \_\_\_\_\_

### EMERGENCY CONTACT:

Please note your next of kin, someone who is designated to handle your advanced directives, estate, etc.

Name: \_\_\_\_\_  
Tel.: \_\_\_\_\_  
Email: \_\_\_\_\_



Please indicate if you need any special assistance in case of an emergency (e.g., wheelchair, physical disability, frail health):  
\_\_\_\_\_

**B**

### TENANTS:

Name: \_\_\_\_\_  
Name: \_\_\_\_\_  
Name: \_\_\_\_\_  
Name: \_\_\_\_\_  
  
Tel: \_\_\_\_\_  
Cell (#1): \_\_\_\_\_  
Cell (#2): \_\_\_\_\_  
Email: \_\_\_\_\_  
  
Emergency Contact: \_\_\_\_\_  
Tel: \_\_\_\_\_

**C**

Parking Stall Number: \_\_\_\_\_  
Vehicle Make: \_\_\_\_\_  
Model: \_\_\_\_\_ Year: \_\_\_\_\_  
Color: \_\_\_\_\_ License Plate: \_\_\_\_\_

Parking Stall Number: \_\_\_\_\_  
Vehicle Make: \_\_\_\_\_  
Model: \_\_\_\_\_ Year: \_\_\_\_\_  
Color: \_\_\_\_\_ License Plate: \_\_\_\_\_

If stall is rented/used by anyone other than the owner/registered tenant, owner must notify AOA Management in writing of the arrangement.

Entryphone Listing Code: \_\_\_\_\_  
Name: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

### Bicycle Registration

- C&C Permit Number: \_\_\_\_\_  
Make/Model/Color: \_\_\_\_\_  
Stall Number: \_\_\_\_\_
- C&C Permit Number: \_\_\_\_\_  
Make/Model/Color: \_\_\_\_\_  
Stall Number: \_\_\_\_\_

### Pet Registration (separate forms/photo must be filed with Management at Security Desk):

- (1) Breed: \_\_\_\_\_  
Name: \_\_\_\_\_  
  
(2) Breed: \_\_\_\_\_  
Name: \_\_\_\_\_

LEAVE BLANK for the NEW FOBS issued for the new access control system. Do not list current fobs.

Access Number: \_\_\_\_\_  
Access Number: \_\_\_\_\_

Type (circle one): fob / garage clicker / wristband / phone sticker / RF ID / card  
Type (circle one): fob / garage clicker / wristband / phone sticker / RF ID / card  
Type (circle one): fob / garage clicker / wristband / phone sticker / RF ID / card  
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Type (circle one): fob / garage clicker / wristband / phone sticker / RF ID / card

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**I acknowledge that I have received and I have read the House Rules/Policies of Foster Tower.** My family and guests assume the risk while using the common areas, including the gym, sauna, garage, hot tub, and swimming pool. Foster Tower does not have a life guard on duty, and it cannot guarantee or insure your and your guests' safety or security. Foster Tower is a condominium project, not a hotel: apartments are individually managed, booked, and maintained/repared by their owners. Building management does not control the individual units and cannot move tenants to other rooms due to concerns (e.g., if neighbor is renovating their apartment, if furniture/appliances are not adequate). Individual Unit Property Managers assume the role of agent for the apartments. Please report all issues promptly to the property manager assigned to your unit.

Name of Owner (print): \_\_\_\_\_ Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
Name of Renter (print): \_\_\_\_\_ Date: \_\_\_\_\_ Signature: \_\_\_\_\_