

**Cielo Dorado Homeowner Association
EXTRA REMOTE/KEYPAD REQUEST**

Owner/Resident Name(s): _____ (owner)

Lot Address (i.e. 1 Cielo Dorado) _____

Extra Remote Request:

Remotes Requested: _____ (cost is \$30 each due upon delivery)

Purpose of Request: _____

Name of Added Person: _____ Phone: _____

Note: non-household members are not entitled to a remote. Any maintenance crew members, housekeepers, etc. are allowed an access code only.

Keypad Access Request:

Purpose of Request: _____

Name of Added Person: _____ Phone: _____

Days of Access: _____ Time of Access: _____

Note: Gate keypad access may be limited to certain days of the week and times of day, please note if access is to be limited. Use extra pages is necessary.

I understand and agree that the remotes issued to me are for residents of my household and are to be kept secure, and are *not* to be given to anyone other than those named above. I also understand and agree that any replacement remote, required due to loss, theft, or damage, will cost \$50.00 each. I further understand and agree that the keypad access code assigned to me and those in my household are *not* to be given out to anyone, and that a required change of keypad access code due to the compromise of that code will result in a \$25.00 change fee.

Members remain liable for the use of remotes and personal access codes issued under their name.

Owner/Resident Signature

Date

Owner/Resident Signature

Date

Gate Programming Information (filled in by management)

Name	Phone	Remote Serial #	Keypad #

PLEASE RETURN TO:
Cielo Dorado H.O.A.
c/o Cushman & Wakefield | PIREs
5-B Butterfield Trail Blvd
EL PASO TX 79906
FAX: 915-843-8889
E-MAIL: <mailto:kpharr@piresintl.com>

**Cielo Dorado Homeowner Association
New Owners**

Owner/Resident Name(s): _____ (owner)
_____ (spouse or co-owner-circle appropriate)

Lot Address (i.e. 1 Cielo Dorado) _____

Remotes Received: _____ (two remotes are issued at no cost; thereafter, the cost is \$30 each)

**Gate Programming Information
Please print**

Name	Phone	Remote Serial #	Keypad #

I understand and agree that the remotes issued to me are for residents of my household, are to be kept secure, and are *not* to be given to anyone other than those named above. I also understand and agree that any replacement remote, required due to loss, theft, or damage, will cost \$50.00 each. I further understand and agree that the keypad access code assigned to me and those in my household are *not* to be given out to anyone, and that a required change of keypad access code due to the compromise of that code will result in a \$25.00 change fee.

Members remain liable for the use of remotes and personal access codes issued under their name.

Owner/Resident Signature

Date

Owner/Resident Signature

Date

PLEASE RETURN TO:
Cushman & Wakefield | PIRES
5-B Butterfield Trail Blvd.
EL PASO TX 79906
FAX: 915/843-8889
E-MAIL: kpharr@piresintl.com

Cielo Dorado Homeowners Association

Special Access Request Form

This form is used to request access to Cielo Dorado Estates in exception to standard practices as explained in the homeowners' association gates policy Section 3 & 4

CDHA Member or Agency Name:

Cielo Dorado Address, Lot, or Location:

Email Address:

Phone Number:

Please state request and reason for request

List the name(s) phone number(s) and Date(s) Time(s) the requested parties would require gate entry:

(keycode assigned by CDHOA)

Name _____ Phone: _____ Date _____ Time _____ Keycode _____

Name: _____ Phone: _____ Date: _____ Time: _____ Keycode _____

Name: _____ Phone _____ Date: _____ Time: _____ Keycode _____

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Print name of member or agency representative and title

date

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Signature of member or agency representative

date

date received

(completad by CDHOA)

Approved by Cushman & Wakefield | PIREs

Signed: _____

Date: _____

Approved by Gate Committee

Signed: _____

Date: _____

Approved by Board of Directors

Signed: _____

Date: _____