ROSSMOOR RESIDENT SPONSORED RFID DEVICE FORM

Please complete this form, print clearly. Your vehicle must be present to attach device.

A VALID DRIVER'S LICENSE, CURRENT REGISTRATION, and PROOF OF INSURANCE are required.

There is a fee per device **(Please Make Check or Money Order Payable to "GRF") NO CASH.**

DEVICE TO BE ISSUED TO:

Name: _____ Phone # (____)_____

First Last

	Year	Make	Model	Color	License Plate #	State
Vehicle #1						

Sponsor Name_____ Phone # (____)_____

Sponsor Address_____

Sponsor Only

Please indicate days and hours of permitted access (check only one).

☐ **24 HOURS - 7 DAYS**

☐ **MON – FRI: 6AM – 6PM** ☐ **MON – FRI: 6PM – 6AM** ☐ **MON – FRI: 24 HOURS**

☐ **SAT – SUN: 6AM – 6PM** ☐ **SAT – SUN: 6PM – 6AM** ☐ **SAT – SUN: 24 HOURS**

Sponsor's Signature Required_____

I hereby agree to the issuance of a temporary access device for the applicant.

I also agree to be held responsible for the actions of this sponsored individual.

Public Safety Staff Only

RFID Device # _____

Effective _____ to _____

Check #_____ Amount Paid_____

Entered By_____ Date_____

Valid Registration ☐ Valid License ☐ Current Proof of Ins. ☐

DEVICES ARE NOT TRANSFERABLE. Devices are issued TUESDAY through SATURDAY 9:00 AM to 3:30 PM.

This document is based on the requirements of the Golden Rain Foundation Security Access Policy # 103.1

REV 06/21/12