

Reflections Fob/Remote Order Form

Resident Name:	Apartment Number:
Number of Fobs requested: (\$45 each)	Number of Remote requested: (\$75 each)
<input type="checkbox"/> Owner <input type="checkbox"/> Agent (Please attach the Authority Form)	
Mobile:	
Email:	

-
1. Please report any lost/stolen fob or remote to the building manager as soon as possible so it can be disabled in the security system.
 2. Owner or their agent must sign the form to authorise the order.
 3. Payment must be made to the bank account listed below.
 4. Please send a completed and signed copy of this form and payment receipt to bm@108reflections.com.au

Note: Order will be processed after the form and payment are received.

Signature: _____

Date: _____

(Owner/Agent)

Bank Details:

WESTPAC

Account Name: CP Property Management Pty Ltd

BSB Number: 033 132 Account Number: 315 945

Please quote your apartment number as reference.