

### RADIANCE APARTMENTS

188 Day Street, Darling Harbour STRATA PLAN 90171 P: 02 7208 8928

F. 02 7200 0920

E: management@radianceapartments.com.au

# **KEY & ACCESS CARD REQUEST FORM**

Residents requiring an additional or replacement key or access card must complete this form and the attached Omega Restricted Key Request form (if keys only) on the third page, attach agent approval (if required) and email the form to building management at management@radianceapartments.com.au.

#### Keys

Front door keys are registered keys and building management will provide authorisation to the buildings locksmith please, Omega Locksmiths to authorise your new key once the completed application is received. Omega Locksmiths will advise you directly once your key is available and provide to you an invoice to be paid prior to being sent your key. Please contact Omega directly on 03 9689 3488 or omega@omegacorp.com.au if there are any issues obtaining your key once authority has been provided. Please do not pay Strata directly for the key, this is only for access cards, key payments must be made to Omega Locksmiths.

#### **Access Cards & Remotes**

For additional access cards or garage remotes, you must submit this completed form to building management who will authorise the application and then send to the Strata Manager, Wellman Strata (info@wellmanstrata.com.au) who will send an invoice to you for payment. The cost of a new access card is \$80, and the cost of a new garage remote is \$150. Once payment has been confirmed, Wellman Strata will advise building management who can then provide you with your new card. Please note cards cannot be released until payment has been confirmed.

## **CONDITIONS**

RESIDENTS REQUIRING ADDITIONAL KEYS/ACCESS CARDS MUST COMPLETE THIS FORM IN FULL
PROVIDING ALL ACCOMPANYING INFORMATION AND PAYING THE CARD FEE (IF APPLICABLE) PRIOR
TO KEY AUTHORISATION OR AN ACCESS CARD BEING ISSUED.
☐ACCESS CARDS ISSUED HAVE A 12 MONTH WARRANTY, IF CARD IS FOUND TO BE FAULTY WITHIN THIS
TIME MANAGEMENT WILL REPLACE FOR FREE.
RESIDENTS MUST HAVE THEIR DETAILS REGISTERED WITH BUILDING MANAGEMENT TO OBTAIN NEW OR
REPLACEMENT KEYS/ACCESS CARDS.
TENANTS MUST HAVE AN AUTHORISATION LETTER OR EMAIL FROM THEIR MANAGING AGENT TO
OBTAIN ADDITIONAL KEYS/ACCESS CARDS.
☐IN THE INTEREST OF SECURITY AND TO PREVENT OVERCROWDING RESIDENTS ARE RESTRICTED IN THE
NUMBER OF KEYS/ACCESS CARDSTHEY ARE ALLOWED IN ACCORDANCE WITH THE BY-LAWS.
RESIDENTS MAY ALSO BE REQUIRED TO HAVE ALL THEIR ACCESS CARDS AUDITED PRIOR TO
OBTAINING AN ADDITIONAL CARD.
☐ IF YOUR ACCESS CARD IS LOST OR STOLEN YOU WILL NOTIFY BUILDING MANAGEMENT IMMEDIATELY
SO THAT THE CARD CAN BE CANCELLED.





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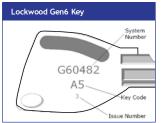
DATE:	APARTMENT NO:	BUILDING:				
NAME:	CONTACT NO:	EMAIL:				
No. Keys requested:						
No. Access cards requested:						
No. Access remotes requested:						
If a replacement key/card,	what happened to your prev	ious card?				
(Please note: If your card has been lost you must bring to the office all cards issued so that the lost card can be identified and cancelled)						
If a new card, please state	the reason for requiring an a	ndditional card?				
, ·	, ,					
(Please note: There are restrictions on the number of access cards available to residents (2xBed/Agent/Office/Spare))						
Are you the owner of the property or tenant?						
If tenant, please provide your agents details:						
,	_					
(Please note: Tenants requesting an additional access card must provide an email from their managing agent authorising the additional card)						
If tenant, has your agent provided an authorisation email or letter?						
Resident Agreement: By tic	king this box , I	confirm				
that I am a current resident of Radiance Apartments and agree to the conditions						
outlined above.						
Ctoff Only						
Staff Only						
<ol> <li>Create task in BMS, assign to Access Card Request under the apartment number.</li> <li>Confirm identity of applicant. Resident must be registered in system. Add confirmation note to task.</li> </ol>						
5) Audit or cancel lost cards. Add co						
	, , , , , , , , , , , , , , , , , , , ,					
<ul><li>9) Update access card register spreadsheet. Add confirmation note to task.</li><li>10) Provide resident with new access card. Add confirmation note to task.</li></ul>						
11) Close task.						
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Notes:						

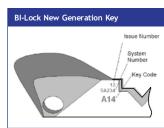




# RESTRICTED KEY REQUEST FORM

All fields are mandatory and payment details must be provided. Return completed form to **keys@omegacorp.com.au** 





Master Key System information	Date: Key System Number: (this is engraved on all keys)  Company Name / Individual:  Delivery Address:  Suburb: Post Code:  Contact Phone Number:				
Quantity Required	Key Code: Key Code:	Qty: Qty:	Key Code: Key Code:	Qty: Qty:	
Delivery Method	Registered Post \$15.00 Express Post \$22.00 Courier: POA  Be notified when ready for collection				
Payment Details	Please provide us with and a proforma involuding banking de CREDIT CARD  Choose card type:  Visa / Master Card Number:  Exp:  INVOICE TO BE SENT	Amex  CCV:	form with chec	nt Code:	
Authorisation for keys to be cut			horised signatory for the above cut the above keys as req Print Name:		

PRINT FORM

RESET FORM