

**ORDER ACCESS DEVICE FORM**

In order to expedite the issuing of access control device(s) it is recommended that you complete the details below so we can issue or have ready the access device(s) for mailing or collection.

**Contact Details**

Date: \_\_\_\_\_

Name: \_\_\_\_\_ (Owner/Agent/Tenant)

Signature: \_\_\_\_\_

Strata Plan Number: \_\_\_\_\_ Lot Number: \_\_\_\_\_ Unit Number: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Mobile: \_\_\_\_\_

**Access Device Details: -**

Access Device Type: \_\_\_\_\_

(Fob tag/garage remote/swipe card etc)

Access Location: \_\_\_\_\_

(Block/Stairwell/Garage etc)

Quantity: \_\_\_\_\_

**Please email this form to [info@strataunited.com.au](mailto:info@strataunited.com.au) or alternatively please post to:  
Level 1/31a Fennell Street, Parramatta NSW 2150**