

**NOTICE:**

Upon receipt of a completed application and a check for full amount due, your membership will be activated immediately. We will notify the Inman Park Security Patrol Car and an officer will add the new membership to the directory carried in the car.

**INMAN PARK SECURITY PATROL  
APPLICATION  
FOR MEMBERSHIP IN THE  
MANAGED PROPERTIES DIVISION**



PLEASE TYPE OR PRINT CLEARLY

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

Quote #: \_\_\_\_\_

**MANAGED PROPERTY INFORMATION**

Name of building: \_\_\_\_\_

Location of Property: \_\_\_\_\_

**HOME OWNERS ASSOCIATION (HOA)**

HOA Name: \_\_\_\_\_

HOA Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**MANAGEMENT COMPANY INFORMATION**

Company Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**RATE QUOTE**  
Please select the level of security membership you are interested in:

LEVEL		ANNUAL FEE		QUARTERLY		MONTHLY	
	Bronze		\$		\$		\$
	Silver		\$		\$		\$
	Gold		\$		\$		\$

**PAYMENT INFORMATION**

Year End:  Calendar Year  Fiscal Year from \_\_\_\_\_ to \_\_\_\_\_. To assist us in providing your quote in a timely manner, please list the date of your budget meeting: \_\_\_\_\_. May we have a representative attend:  Yes  No

Preferred Billing date:  
 First day of the month  15<sup>th</sup> day of the month  Specific date : \_\_\_\_\_

To activate your membership in the Inman Park Security Patrol for Managed Properties, please submit this application to:

**IPNA  
167 Elizabeth St., N.E.  
Atlanta, GA 30307**

Office use only: Ck. # \_\_\_\_\_ Dated: \_\_\_\_\_ Received on: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Office use only: Assigned Account Number: \_\_\_\_\_