THE LOOK-OUT PLACE For You

SUITE 138
24123 Peachland Blvd C-4
Port Charlotte, FL 33954
(941)-629-9542

PROPERTY WORK ORDER FORM

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Florida Property Description

Owner's Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Type of Property: (select one)

☐ Single Family ☐ Multi-Family ☐ Two-Story Property ☐ Business ☐ Other (explain below)

_____

_____

Alarm System: ☐ No ☐ Yes Code: _____

☐ Notify someone in the Port Charlotte area: (explain)

_____

_____

Keys:

☐ To be mailed
☐ To be picked up locally
- ☐ Door Key
- ☐ Car Key
- ☐ Boat Key

DISCLAIMER

Whereas the Customer is in need of home, business, boat, or other monitoring services that The Lookout Place, its agents, employees, or servants, hereinafter collectively referred to as "the Company" are able and willing to provide, the parties agree as follows: The Company shall provide the necessary monitoring services on a routine and regular basis. The Company shall have reasonable access to the property which is subject to this agreement and which is described in more detail below. In consideration for said services the Customer agrees to pay the contract price described herein.

This instrument and any accompanying documentation, the contents of which are acknowledged, agreed to, and incorporated herein, is a Florida contract and shall be governed by and construed in accordance with the laws of the State of Florida. The Company agrees to comply with all applicable law. The parties shall not rely on any oral representations made before or after the signing of this agreement. Any modifications to this agreement must be made in a written instrument signed by both parties.

_____

Signature of Authorized Signer Date

_____

Name of Authorized Signer (please print)