

Owner/Resident RFID Application

Owner/Resident Full Name

Local Address _____ Lot # _____

Mailing Address (if different): _____

Telephone Numbers

Home _____ Mobile _____ Work _____

Out of Town Address _____

City _____ State & Zip _____ Telephone _____

Vehicle Information:

Vehicle 1: Year _____ Make _____ Model _____ Color _____

Tag#/State _____ RFID Number Assigned* _____

Vehicle 2: Year _____ Make _____ Model _____ Color _____

Tag#/State _____ RFID Number Assigned* _____

Vehicle 3: Year _____ Make _____ Model _____ Color _____

Tag#/State _____ RFID Number Assigned* _____

Vehicle 4: Year _____ Make _____ Model _____ Color _____

Tag#/State _____ RFID Number Assigned* _____

(For additional vehicles see reverse side)

Please Note:

A copy of each vehicle registration MUST accompany this application. No RFID will be issued without proper verification. Non-resident property owners must have a license or other form of identification. All RFID's are to be removed from vehicles and destroyed at the time the vehicle is disposed of or when the party to whom the tag is assigned is no longer a resident/owner of Spruce Creek Fly-In, and at that time notification must be made to the POA or Security. Proper use of all RFID's is the direct responsibility of the resident/owner. RFID privileges may be suspended for all vehicles at the direction of the Board of Directors for non-compliance with Spruce Creek documents including C & R's & Rules and Regulations, for non-payment of assessments or fines, or traffic violations.

I agree to be bound by the above provisions. _____

(Signature of owner/resident)

***Indicates information to be completed by Spruce Creek personnel**

For voluntary emergency and aircraft information, please see the reverse side.

RFID – Radio Frequency Identification

SPRUCE CREEK FLY-IN

Additional Vehicles

Vehicle 5: Year _____ Make _____ Model _____ Color _____

Tag#/State _____ RFID Number Assigned* _____

Vehicle 6: Year _____ Make _____ Model _____ Color _____

Tag#/State _____ RFID Number Assigned* _____

VOLUNTARY INFORMATION

Emergency Information

In case of an emergency please notify the following

Name _____ Telephone No. _____

Name _____ Telephone No. _____

If you own and/or store aircraft at Spruce Creek Fly-In, the following information would be appreciated

Model _____ Registration _____

Model _____ Registration _____

This section to be completed by Spruce Creek Fly-In Personnel

Issued by _____ Date _____ Applied by _____

Amount Paid _____ Date _____ Signature _____