

THE CAPES HOMEOWNERS' ASSOCIATION, INC

Homeowner Courtesy Key Check Out Program Liability Waiver & Release Form

WHEREAS, the undersigned homeowner ("Homeowner") of Lot # or property address:

_____ desires to leave a house key to said unit with The Capes Homeowners' Association, Inc., ("HOA"), to be held by HOA in its key safe for release to Homeowner's friends, family and/or subcontractors solely under the direct instruction of Homeowner.

NOW, THEREFORE, in consideration of HOA agreeing to retain Homeowner's house key for the sole and express purpose recited in this document, Homeowner hereby irrevocably and personally releases, holds harmless, forever discharges and, if applicable agrees to indemnify, HOA and each and every officer, agent and employee of HOA (referred to collectively as "HOA, et. al.") from any and all claims, including death, causes of action and/or liability of every kind, known or unknown, which Homeowner or any person claiming through Homeowner may have in the future against HOA, et. al. resulting from HOA's acceptance or release of Homeowner's house key in accordance with Homeowner's instructions.

Homeowner hereby acknowledges that he/she has read this document and fully understands the terms used in it and their legal significance. Homeowner further acknowledges that this Release was freely and voluntarily initiated by Homeowner and given with the understanding that all rights to legal recourse against HOA, et. al. resulting from HOA's acceptance or release of Homeowner's house key in accordance with Homeowner's instructions are expressly and knowingly given up.

This Liability Waiver & Release Form shall be regarded for all purposes as an Oregon document, and the validity and construction hereof shall be determined and governed in all respects by the laws of Oregon.

THIS IS A RELEASE OF YOUR RIGHTS. PLEASE READ CAREFULLY BEFORE SIGNING.

Homeowner:

Name Signature Date

Name Signature Date

Key received by:

Name Signature Date

THE CAPES HOMEOWNERS' ASSOCIATION, INC

"Courtesy Key Program" Key Acceptance Form

Homeowner Name: _____ Last 4 of SSN _____

Lot # _____ or Property Address: _____

Homeowner Phone Number(s): _____

(To be used in case of questions regarding identification of person requesting to check out your house key).

The Following Individuals are authorized to check out my house key without further direction from me:

1. _____
2. _____
3. _____
4. _____

By signing below, I am agreeing to the following "Courtesy Key Program" rules:

1. Only one house key is to be stored and accepted for storage.
2. Homeowner agrees that the following staff persons are authorized to distribute your house key for checkout: HOA Manager, Office Staff Member and any other persons that the Board of Directors may, in the future, provide key distribution authority to.
3. Homeowner is aware that only those individuals with a valid, government-issued photo I.D. will be allowed to check out their house key.
4. Homeowner is aware that keys will be distributed to only those individuals who are: A; Listed on this form, B; Have been authorized, by homeowner, prior to their request for such key. Please be aware that you must call or communicate in person with the HOA Office to authorize the check out of your key on a "one-time basis". Future requests for key check out by individuals not listed on this form will require an additional authorization by the homeowner by phone or in person.
5. Keys may only be checked out during normal working hours (8AM-4:30pm, M-S) .
6. It is the sole responsibility of the homeowner to insure return of the key to the system after it has been lent out to an authorized person. Key must be returned to the HOA Office staff..

7. X _____ Date: _____

Homeowner

Office Use: Received By: _____ Date: _____