

## Resident Access Card Information Form 2024

Please respond by 7/13/2024. We will begin home visits for non-responders starting 7/15/2024

**Updated 7/1/2024** 

1.	Owner Name	Address
	Email Phone	
	Alternate Mailing Address	City/State/Zip
l give	the Town permission to register me for 🛭 Emergency Ale	erts General Town Notifications (Initial)
2.	Owner Name	Address
	Email Phone	
	Alternate Mailing Address	City/State/Zip
l give	Alternate Mailing Address the Town permission to register me for Emergency Ale	General Town Notifications (Initial)
НΟ	JSEHOLD INFORMATION	
Prima	ry Language Spoken at Home	
How r	many residents reside in your household:	
Are yo	ou an Owner/Tenant/Property Manager/Other?:	If Other, please specify:
For Te	enants:	
	Rental Agreement Start Date: Rental	Term Length:

## Members of Household's Names, Ages, Relationships:

Family Member Name	GenderAgeDate of Birth	
Relationship	Contact Number/Cell Phone Number	_
Relationship	Contact Number/Cell Phone Number	_
Email	Dietary Requests (check any that apply Kosher Vegetarian	
Family Member Name	Gender Age Date of Birth	
Family Member Name	Gender Age Date of Birth	
Family Member Name	Gender Age Date of Birth	
Family Member Name	Gender Age Date of Birth	
Relationship	Contact Number/Cell Phone Number	_
		1
Relationship	Contact Number/Cell Phone Number	_
		_
Email	Dietary Requests (check any that apply): Kosher Vegetarian	
	Relationship	Relationship

## **EMERGENCY INFORMATION**

Emergency Contact Name:		Emergency Contact Phone:			<del></del>
Em	ergency Contact Address:				
Em	ergency Contact Name:	Emergency Contact Phone:			
Em	ergency Contact Address:				
Pref	ferred Hospital:				
n case	of an emergency, is there anyone in your hor	me who r	may require	e special assistance	e (Elderly, Disabled etc.):
es or	No				
o you	have a Home Security Alarm? (Please choo	ose): If	Yes	No	
es, is i	t an Audible Alarm? (Please choose):	Yes	No		
larm (	Company Name:		_ Alarm Co	mpany Phone:	
VE	EHICLE INFORMATION				
1.	Vehicle Year: Make: Primary Driver of this Vehicle: Vehicle License Plate Number: Vehicle Transponder ID Number				
2.	Vehicle Year: Make: Primary Driver of this Vehicle: Vehicle License Plate Number: Vehicle Transponder ID Number				

3.	Vehicle Year: Make: Primary Driver of this Vehicle: Vehicle License Plate Number: Vehicle Transponder ID Number		
4.	Vehicle Year: Make: Primary Driver of this Vehicle: Vehicle License Plate Number: Vehicle Transponder ID Number		
	Vehicle Year: Make: Primary Driver of this Vehicle: Vehicle License Plate Number: Vehicle Transponder ID Number		
	·	•	
1.	Make Model Name of the Vessel	Color	_
2.	Hull Identification Number (HIN) Make Model Name of the Vessel	Color	
3.	Hull Identification Number (HIN) Make Model Name of the Vessel	Color	_
Н	OUSE STAFF INFORMAT	ΓΙΟΝ	
	Staff Member Name		
_•	Phone Typica	al Hours of Work	
	(Please check one) Live-In	Part-Time	
2.	Staff Member Name	Job	
	Phone Typica	al Hours of Work	
	( <b>Please circle one</b> ) Live-In P	art-Time	

3.	Staff Member Name	<u> </u>			Job	
	Phone		Typical H	lours of W	ork	
	(Please circle one)					
4.	Staff Member Name	<u></u>			Job	
••	Phone					
	(Please circle one)					
) [	TS					
L	-13					
1.	Pets Name :		Pets A	ge:	Pets Breed:	
	Gender:	Color:		Weight: _		
	Type of Pet :		DOG	CAT	OTHER (please specify):	<u></u>
2.	Pets Name :		Pets A	ge:	Pets Breed:	
	Gender:	Color:		Weight: _		
	Type of Pet :		DOG	CAT	OTHER (please specify):	
3.	Pets Name :		Pets A	ge:	Pets Breed:	
	Gender:					
					OTHER (please specify):	

## **RESIDENT ID CARD**

Please contact Town Hall to obtain your Town Access ID Card at <a href="mailto:ResidentServices@goldenbeach.us">ResidentServices@goldenbeach.us</a>

- Include the words "RESIDENT ID" in the email subject line.
- Include your First & Last Name and Address
- Include a passport-style photo, keep in mind the following criteria:
  - 1. Submit **one color photo** per ID, label the file with your full name.
  - 2. Submit a recent photo taken in last 6 months.
  - 3. Use a clear, high-resolution image of your face.
  - 4. **Do not change your photo** using computer software, phone apps or filters, or artificial intelligence.
  - 5. Have someone else take your photo. **No selfies**.
  - 6. Take off your eyeglasses, earbuds, headphones, or hats for your photo.
  - 7. Use a white or off-white background without shadows, texture, or lines.
- We will notify you by email when your ID is ready for pick-up