



AUTHORIZATION FOR KEY DELIVERY

UNIT # _____

DATE _____

We hereby authorize Marina Towers Condominium Association Management Office to give to the person(s) as listed below a key to my unit. I hereby indemnify and will save and hold harmless the Marina Towers Condominium Association, FirstService Residential LLC., their employees and agents harmless from any claim, loss, cost or damage by any party, arising either directly or indirectly to this request.

We hereby release and waive any claims against the Marina Towers Condominium Association, FirstService Residential LLC., their officers, directors and all their representatives, agents, officers, and employees from any liability, claims or actions, that may accrue to us or our heirs, representatives or assigns from every and any loss, damage and inquiry incurred or sustained by or to our person and/or damage or theft of property arising or in any way related to authorizations in this document.

I understand this key authorization form is only valid for the duration of the dates I have listed below.

Guest Name(s): _____

Dates authorized: _____

Resident Name (please print): _____

Resident signature: _____

Phone # _____

Phone
312-644-1187

Fax
312-644-1831

Address
300 N State St
Chicago, IL 60654

Email
marinatowers@fsresidential.com