

SECURITY QUESTIONNAIRE & TRANSPONDER APPLICATION  
**For RESIDENTS ONLY**  
IRONWOOD COMMUNITY ASSOCIATION

For your privacy, protections, and the security of information, this application will be treated as Confidential and shared only on a need to know basis.

Date: \_\_\_\_\_

Please check one: \_\_\_\_\_ Account Update \_\_\_\_\_ New Application

PROPERTY OWNER(S)

Last name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Ironwood address: \_\_\_\_\_  
Palm Desert CA 92260

Telephone: \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

Away address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Club member? Yes \_\_\_\_\_ Number \_\_\_\_\_ No \_\_\_\_\_

RESIDENTS – Please list name and relationship of ALL those maintaining residence in home: owners, son, daughter, significant other, caregiver, etc.

Please check one: Owner \_\_\_\_\_ Renter or Leaser \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

EMERGENCY CONTACT INFORMATION – in priority order

Name \_\_\_\_\_ Tel \_\_\_\_\_ Cell \_\_\_\_\_

Name \_\_\_\_\_ Tel \_\_\_\_\_ Cell \_\_\_\_\_

Alarm Company

Name \_\_\_\_\_ Tel \_\_\_\_\_ Cell \_\_\_\_\_

**PASSWORD (Confidential)** This should be a four digit number, single word, or double word phrase known only to you and individuals you authorize to access control:

\_\_\_\_\_

**PERMANENT GUEST PASS LIST – For friends/family who visit on a frequent basis.** People on this list are pre-authorized to pick up a Day Pass at the gate when they visit. Less frequent guests should be authorized a Day Pass by homeowners. Do NOT list vendors, service people, housecleaners or any other commercial persons in this category.

Name \_\_\_\_\_ Name \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

**MOTOR VEHICLES – automobiles or golf carts using controlled access gates. Please Note: transponders are assigned to specific vehicles only and are not transferable unless this Security form is updated.**

1) MAKE \_\_\_\_\_ YR \_\_\_\_\_ MODEL \_\_\_\_\_ COLOR \_\_\_\_\_ LICENSE \_\_\_\_\_ STATE \_\_\_\_\_

Non-transferable transponder number \_\_\_\_\_ (by resident if updating account)

2) MAKE \_\_\_\_\_ YR \_\_\_\_\_ MODEL \_\_\_\_\_ COLOR \_\_\_\_\_ LICENSE \_\_\_\_\_ STATE \_\_\_\_\_

Non-transferable transponder number \_\_\_\_\_ (by resident if updating account)

3) MAKE \_\_\_\_\_ YR \_\_\_\_\_ MODEL \_\_\_\_\_ COLOR \_\_\_\_\_ LICENSE \_\_\_\_\_ STATE \_\_\_\_\_

Non-transferable transponder number \_\_\_\_\_ (by resident if updating account)

4) MAKE \_\_\_\_\_ YR \_\_\_\_\_ MODEL \_\_\_\_\_ COLOR \_\_\_\_\_ LICENSE \_\_\_\_\_ STATE \_\_\_\_\_

Non-transferable transponder number \_\_\_\_\_ (by resident if updating account)

Transponders: \_\_\_\_\_ X \$50.00 each = \_\_\_\_\_

10 year license plate transponders: \_\_\_\_\_ X \$75.00 each = \_\_\_\_\_

TOTAL \_\_\_\_\_

Cash/Receipt # \_\_\_\_\_ Check # \_\_\_\_\_

Make checks payable to Ironwood Community Association.  
Transponders to be mailed to:

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Please use additional sheets for additional information. If there are questions, please contact  
DRM at 760.346.1161 or Ironwood Security at 760.346.4627.