

2020 BROOKS TOWER RESIDENCES UPDATE

1020 15th St., Denver, CO 80202

Date: _____

UNIT # _____

PARKING SPACE _____

OWNER INFORMATION

NAME: _____

HOME #: _____

WORK#: _____

CELL #: _____

PERMANENT ADDRESS: _____

E-MAIL: _____

Yes, I would like to receive Brooks Tower communication by email.

RENTER/TENANT INFORMATION

NAME: _____

HOME #: _____

WORK#: _____

LEASE DATES: _____

CELL #: _____

E-MAIL: _____

EMERGENCY CONTACT INFORMATION

NAME: _____

HOME: _____

CELL: _____

PLEASE RETURN TO THE FRONT DESK OR MANAGEMENT OFFICE BY FEBRUARY 21ST

Please list all access cards and fobs in your possession (first grouping of numbers on back of card/fob):

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

**BROOKS TOWER RESIDENCES
1020 15TH STREET, DENVER, CO 80202
303-629-7200
(Fax 303-825-6941)**

Unit # _____

2020 BICYCLE REGISTRATION

NAME: _____

DATE: _____

UNIT # _____

MAKE: _____

MODEL: _____

SERIAL #: _____

PERMIT #: _____

COLOR: _____

All residents parking bicycles in Brooks Tower Parking Garage must display a current parking permit.

The Brooks Tower Residences Condominium Association shall not be liable or responsible for any loss, damage, injury, or accident to either person or property in the Building parking facility due to any cause whatsoever. The Resident shall hold Brooks Tower Residences Condominium Association harmless from and against any such loss, damage, accident, injury, claim or demand.

Management does not guarantee any right of use of any bicycle parking space at any time.

X _____
Residents Signature

Starting February 29, 2020, there will be a \$50 permit fee associated with registering a bike. All bikes not registered with the Management Office by that date will be taken out of the bike storage area and donated.



DENVER
THE MILE HIGH CITY

CITY AND COUNTY OF DENVER
Department of Safety
Fire Department
Fire Prevention Division

P.O. Box 40385
Denver, CO 80204
p: 720.913.3474
f: 720.913.3587

Residential Fire Safety Equipment Report

Homeowner: *As a homeowner or tenant in a multi-unit residential facility, you are required to complete this report **and submit it to the property management or homeowners' association (HOA) annually**, unless the management is doing the required maintenance for you. We recommend that batteries in detectors be changed in the spring and fall—same time you change the clocks for daylight savings time. Portable fire extinguishers must be inspected once a year and hydrostatically tested every five years.*

Property Manager or HOA Administrator: *As a property manager or homeowners' association administrator, you are required to obtain Residential Fire Safety Equipment Reports for each unit annually. The reports must be kept on file and ready for inspection by Denver Fire Department personnel for three years.*

You may download additional forms at:

<https://www.denvergov.org/Services/FirePrevention/HomeFireSafety/SmokeDetectorsCarbonMonoxideDetectorsandFire/tabid/437025/Default.aspx>

Date: _____

Name: _____

Address: _____ Unit # _____
Denver, CO 802_____

SMOKE ALARM *(should be tested monthly and batteries changed at least annually)*

Number of smoke alarms in residence _____ Year(s) of manufacture _____

Date test was completed _____ Batteries changed? Yes No

PORTABLE FIRE EXTINGUISHER *(must be inspected once a year)*

Number of portable fire extinguishers in residence _____ Year(s) of manufacture _____

Date of last inspection _____

CARBON MONOXIDE ALARM *(should be tested monthly and batteries changed at least annually)*

Number of carbon monoxide alarms in residence _____ Year(s) of manufacture _____

Date test was completed _____ Batteries changed? Yes No

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303-629-7200 (Fax 303-825-6941)**

2020 ON-ACCOUNT PARKING AGREEMENT

NAME: _____

UNIT: _____

I hereby agree to pay for all parking tickets billed by visitors to my Unit. Specifically listed below are individuals authorized to sign tickets, and this list shall remain in effect until rescinded in writing by the Unit Owner:

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

I agree that Brooks Tower Home Owners Association shall not be liable for any loss, damage or injury to persons or property due to any cause whatsoever, and understand that Management does not guaranty the right of use of any parking space at any time.

Owners Signature: _____

Date: _____

2020 BROOKS TOWER UNIT ENTRY AUTHORIZATION

NAME:

Resident's full name or company name

UNIT:

DATE:

EFFECTIVE DATES:

Until:

The undersigned Resident of Unit # _____, Brooks Tower, 1020 15th Street, Denver, Colorado, hereby authorizes the Brooks Tower Front Desk Attendants and/or any other employee, representative or agent to open the unit and/or release keys to the apartment and/or mailbox herein before described for the following person(s) who may have free and unrestricted access thereto:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

The resident hereby covenants and agrees to hold Brooks Tower Residences Condominium Association, Inc. its agents employees, representatives or managers harmless of and from any and all responsibility and liability under an circumstances for any reason whatsoever including, without limitation, loss and/or damage to person or property for opening and/or releasing keys (unit keys, mailbox keys and/or building access keys) for said condominium unit in conformance with this authorization and providing access thereto to any or all of the aforementioned persons. This authorization will be effective through the date above.

Resident's Signature _____

Accepted this _____ day of _____, 20_____

Brooks Tower Residences Condominium Association, Inc.

By: _____

Additional Information on Reverse Side.