



P.O. Box 271227 Louisville, CO. 80027
support@apartmentlines.com

Phone: 800-583-7769
Fax: 877-225-9824

Service Application & Contract

Business Name: _____ Contact Person: _____

Address: _____ City: _____ St: _____ Zip: _____

Phone: _____ Fax: _____ Tax Exempt? *Yes ___ No ___

Management Co.: _____ Mgmt. Co. Phone: _____
(if none, enter owner's name)

Supervisor: _____ Supervisor Email: _____

Supervisor Phone: _____ # of Units: _____ Date Service Will Begin: _____

* If business is tax exempt and is located in Texas, a completed certificate of exemption must be submitted with this document to avoid sales tax.

Apartment Lines and Cardinal One Ventures LLC (collectively, "Provider") agrees to provide Answering Services as outlined in published rate sheet or as requested by Customer.

Customer hereby relieves Provider from any loss, delay or inaccuracy of any message or liability for any damages, expenses or any other associated cost arising from said loss, delay, or any inaccuracy as a result of any operational problem and/or act of God and beyond their control related to any service provided.

Excepting gross negligence, Provider's liability will be limited to the monthly cost of service to Customer for the month in which any claim occurs.

Invoices are due the first day of the month for which service is being billed. Invoices are mailed approximately 30 days in advance to promote timely payment. The client understands that if the account is 60 days overdue, service may be interrupted for non-payment.

Any and all information provided to Customer is solely for use by Customer, and may not be distributed to any third parties.

Excluding immediate termination for non-payment, bankruptcy or illegal business practices, this contract remains in force unless terminated by either party (Customer or Provider) by a 30 day advanced written notice. Contract remains in force regardless of change of Management. In the event that the property or properties served under this contract is/are sold, Management agrees to inform Provider of such sale in writing no later than 5 days after sale. Failure to do so obligates Management for any services provided after sale date.

The undersigned represents that he/she is authorized to act as the Agent of Customer, and has the authority to execute this contract on behalf of Customer.

Signature: _____ Date: _____
As Agent for Customer and on behalf of Management.

Print Name: _____ Title: _____

Accepted: *Apartment Lines / Cardinal One Ventures LLC* by 

Please refer your partner properties to Apartment Lines:

Phone **1-800-583-7769** Fax **1-877-225-9824** support@apartmentlines.com



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Apartment Name: _____ Address: _____
City: _____ St: _____ Zip: _____ Phone: _____
Backline: _____ Fax: _____ # of Units: _____
Office Hours: _____ Email: _____

Contact Information

(Circle which item)
Manager: _____ Home #: _____ Beeper/Cell#: _____
Asst. Manager: _____ Home#: _____ Beeper/Cell#: _____
Maintenance: _____ Home #: _____ Beeper/Cell#: _____
Maintenance: _____ Home #: _____ Beeper/Cell#: _____
Maintenance: _____ Home #: _____ Beeper/Cell#: _____
Courtesy: _____ Home #: _____ Beeper/Cell#: _____
Courtesy: _____ Home #: _____ Beeper/Cell#: _____
Do you do Lock Outs? _____ Who to contact? _____ Lock Out Fee? _____ Must pay up front? _____

We contact you automatically for fire or flood. Check off other items you wish to be contacted about after hours:

Access Gate Failure	___	Garage Door Stuck	___	Noise Complaint	___	Sewer Backup	___
A/C Not Working	___	Gas Leak Smell	___	No Hot Water	___	Sink Stopped Up	___
Broken Door or Window	___	Heat Not Working	___	No Working Toilet	___	Stove Not Working	___
Criminal Activity	___	Icy Sidewalks	___	Pool Problems	___	Towing Requests	___
Electrical Outages	___	Laundry Room Problem	___	Refrigerator Outage	___	Water Leaking	___
Elevator Stuck	___	Medical Emergency	___	Resident Irate	___	Water Won't Shut Off	___

Any exceptions for elderly, handicapped or infant in unit? _____

Please describe the call procedure the operators should follow for the types of situations listed below (Ex. 'Call On-call Maint first, if no response in 30 min, call Manager.')

Maintenance: _____
Courtesy: _____
Call home, pager or cell numbers first? _____ Do you work on HVAC after dark? _____
Other comments or instructions? _____

Please attach any rotating on-call schedule for maintenance, courtesy patrol or management.

Email completed form to support@apartmentlines.com or fax to 1-877-225-9824