

Pinnacle Marina Tower Association

DELIVERY REQUEST FORM

Resident Name_____

Unit Number_____

Preferred Contact Number on Day of Delivery_____

Date of Delivery_____

Time of Delivery_____

**Deliveries must be between the hours of 8:00 AM- 4:30 PM Monday through Friday ONLY;
No major holidays.**

AGREEMENT

The resident agrees, except as a result of the active negligence of the Association, the resident will indemnify, hold harmless, and defend the Association from any claims, losses, expenses or any costs whatsoever including, but not limited to, those resulting from bodily injury, including death and/or damage to property of third parties, the Owner/Resident, the Association, its owners, directors, officers, employees and agents, arising out of the function reserved herewith.

Resident Signature

Date:_____

INSTRUCTIONS:

Complete and submit this form to the Concierge Desk prior to the date of delivery. Deliveries are confirmed and placed on the schedule only when completed forms are received.