



**SOUTHSHORE RESIDENTIAL COMMUNITY ASSOCIATION  
VACATION HOUSE CHECK REQUEST FORM**

*Please complete the information below if you would like the SouthShore Association to begin vacation house checks on your residence for the period indicated below. Please return to the Association Office once complete.*

Resident Name: \_\_\_\_\_

Date of Request: \_\_\_\_\_

Departure Date/Time: \_\_\_\_\_

Return Date/Time: \_\_\_\_\_

Property Address: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

Name of Guest(s) Staying at Residence While on Vacation, with Contact Phone Numbers:

\_\_\_\_\_

**Level 1 Inspection:** There is no fee for a Level 1 inspection, which involves a daily visual inspection of the portions of the home visible without entering the perimeter areas, plus each item I have checked below:

\_\_\_\_\_ Move emptied trash bins from the street to an area out of public view

\_\_\_\_\_ Collect and discard newspapers left in areas visible to the public

My signature below authorizes Security to conduct a Level 1 Inspection at that above listed residence during our absence.  
**Security WILL NOT collect mail or delivered packages left for Residents.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

**Level 2 Inspection:** There is a \$25.00 per week (or fraction thereof) fee for Level 2 Inspections, which include all actions involved in Level 1 Inspections plus one perimeter check within 2 days of the Resident leaving and one perimeter check each week they are gone. Perimeter checks involve a walk around the side and rear yards and checking of all accessible windows and doors to ensure they are locked and looking for disturbances. Perimeter checks will not be conducted where pets have access to the perimeter area.

My signature below authorizes Security to conduct a Level 2 Inspection at the above listed residence during our absence.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

**SOUTHSHORE RESIDENTIAL COMMUNITY ASSOCIATION VACATION HOUSE CHECK**  
**LIABILITY LIMITATIONS AND INDEMNIFICATION**

**Limitation of Liability.** By signing the Vacation House Check Form, you acknowledge and agree that the SouthShore Association, its officers, directors, managers, agents, representatives, successors and/or employees (collectively referred to as "Association") are not an insurer and that insurance for personal injury and property loss or damage to the Resident's premises should be obtained by Residents and/or Tenants; that the SouthShore Association is only implementing this Policy as a courtesy to Residents to reduce certain risks of loss; and that payments provided for additional services are unrelated to the value of any property located on Owner's premises, or any personal injury that might occur. The Association shall not be responsible for any losses, damage or injury which may occur, even if due to Association's negligent performance or failure to perform any of the provisions described in this Policy. The Residents acknowledge and agree that it is impractical and extremely difficult to fix actual damages, including those from property loss, personal injury or death, if any, which may result from Association's negligence, or failure to perform any of the courtesies described above, the failure of the security officer to perform inspections with resulting loss to Residents because of among other things (1) the uncertain amount of value of residents property or the property of others kept on the premises which may be lost, stolen, destroyed, damaged or any personal injury damages which may result from occurrences which these services are designed to avert; (2) the uncertainty of response time of any police or fire department, paramedic unit or others should they be dispatched; (3) the inability to ascertain what portion, if any, of any property loss, personal injury or death would be proximately caused by Association's failure to perform; (4) the uncertainty of the nature of any claim that might be made by Residents against the Association; and (5) the nature of the service to be performed by Association.

**Third Party Indemnification.** Further, by signing the Vacation House Check Form, you acknowledge and agree that in the event any person, including but not limited to Residents, shall make any claim or file any lawsuit against Association for any reason whatsoever in connection with the services described above; any act or omission of Association, or the Association's negligence, Resident shall indemnify, defend and hold Association harmless from any and all such claims, including the payment of all damages, expenses, costs, and attorney's fees, whether these claims be based on upon alleged intentional conduct, negligence, contribution, indemnification, or strict liability. You agree to indemnify the Association against, defend and hold the Association harmless from any action for subrogation which may be brought against Association by any insurance provider or its agents including the payment of all damages, costs and attorney's fees. As such, you shall be responsible to notify your insurance carrier of the terms of this provision.

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Signature

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Date