

Permission for SPA Personnel Access

I, _____ as a member of _____ POA Board, do authorize SPA Personnel to enter our POA during regular patrols and for resident requested extended stay checks. I _____ authorize SPA Personnel to enter our POA when a resident asks them to respond to an approved incident. If I do not authorize them to respond, I understand that this will remain in effect until a board member signs a new access permission form and will not be reversible through phone call authorization.

Board Member Signature

Date

CTA Vice President

Date