



**ELECTRONIC
LOCKSMITH**

540 Cooper Oaks Ct • Apopka, FL 32703 • PHONE 407-814-4974 • FAX 407-386-7761

Name: _____ Email: _____

Phone Number: _____ Fax Number: _____

Property Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Brand: Onity VingCard Saflok Other: _____

Rooms Are: Exterior Interior **Age of Locks / Installation Year:** _____

Deadbolts Are: Standard Auto **Lock Model** (Example: HT24, SL2500): _____

Finish: Satin Brass Satin Chrome Other: _____

Quantity of Guest Room Locks: _____ Quantity of Access Controls: _____

Front Desk System Model (Example: HT20i, HT22m, 2800): _____

Front Desk Equipment is: Working Not Working Unsure

How much would you like to receive for everything listed? \$ _____.

Additional Information: _____

By signing below, I acknowledge that Electronic Locksmith, Inc, also known as ElectronicLocksmith.com, may decline to purchase items expressly included or otherwise implied herein and company is not bound to make any offer or purchase. Signee may receive a preliminary quote, which you can choose to accept or decline, at the discretion of Electronic Locksmith, Inc. Company will send you instructions for sending your equipment to Electronic Locksmith, Inc. if you accept.

Signature: _____ Date: _____

Please submit Purchase Proposals to LockBuyer@ElectronicLocksmith.com. Photographs of locks and listed materials may help expedite proposal process.