

ACCOUNT HOLDER INFORMATION:

Name of SunPass Account Holder - **PRINT ONLY.**

Street Address Include Unit/Apt. Number if applicable

City State Zip

Daytime Telephone Mobile Phone

Email Address Print

TRANSPONDER # **(ALL 13 DIGITS ARE REQUIRED!)**

PLAN
TYPE

Portable? Sticker-type?

TRANSPONDER #2 **(If a second Pass Plan is being Purchased)**

PLAN
TYPE

Portable? Sticker-type?

SUNPASS ACCOUNT # **(REQUIRED)**

Make:

Model:

Year:

PAYMENT INFORMATION

CREDIT CARD PAYMENT:



Cardholder Name

Account Number

Exp. Date: CVV/CID# Billing Zip Code:

I hereby authorize the Town of Bay Harbor Islands to charge my credit card in the amount of _____ (\$300.00 per each annual plan, \$175.00 per each 6-month plan).

Signature: _____ Date: _____

Fill out form using your keyboard/keypad. You will need to save the form first, then fill it out and email it back. Please read each line and fill out the form in its entirety. Under "Plan Type" specify if you are applying for a "6-month" or "Annual" Plan. In the signature fields, simply type your name. When you are finished, email the PDF form to bmorin@bayharborislands-fl.gov.

TERMS & CONDITIONS OF THE BAY HARBOR ISLANDS SHEPARD BROAD CAUSEWAY SUNPASS FLAT RATE PLAN (PASS PLAN)

In order to avail oneself of the Pass Plan program and be exempted from tolls on the Broad Causeway/SR922, you must have an existing and ACTIVE SunPass account in your name, with a POSITIVE BALANCE at all time, owe no money to the Town of Bay Harbor Islands, SunPass or FDOT, a working transponder properly mounted on your vehicle and pay for any toll charges you incur, including Toll-by-plate charges.

Purchase of the Pass Plan allows you exemption for the registered transponder only. *We do not exempt via license plates.* The transponder must always be properly mounted, at all times. It is the user's responsibility to determine proper placement. If the exempt Transponder is not read by the receiver in the electronic toll collection lane for any reason, including but not limited to improper mounting, solar attenuating glass windshields, UV window tint film, speeding, tailgating or transponder malfunction, you will be liable for payment of the resulting image (ITOL) toll along with any resulting fines, collection or court costs and other penalties which may include points on your driving record which may result in the suspension of one's driver license or vehicle registration. If at any time you damage your exempt transponder, attempt to remove and reuse a sticker/mini transponder carrying an exempt chip, allow your SunPass account balance to fall below zero or fail to properly mount your exempt transponder, you will be liable for any and all charges billed via your license plate. NO REFUNDS WILL BE GIVEN.

You agree that the Town of Bay Harbor Islands has no obligation or liability to you with respect to your use or the performance of the SunPass. You agree to indemnify and hold harmless from and against any and all damages, loss, cost, expense or liability relating to, arising from, or as a result of, the use or performance of the SunPass device. No refunds for tolls resulting from misuse will be given. You are responsible for notifying the Town and SunPass should you change vehicles or transponders. The Pass Plan is non-transferable and non-refundable.

Violation of Terms and Conditions. Failure to abide by any of the terms and conditions stated in this agreement will terminate your current Pass Plan (immediately disqualify your device) and (any and all) toll trip transactions executed thereafter will be processed through the SunPass or Toll by Plate program as stated in the SunPass Business Rules. See link: www.sunpass.com/en/support/custagreement.shtml. You may terminate your Pass Plan within 5 business days of your enrollment or renewal date. If the amount paid for your Pass Plan exceeds the dollar value of your trips to date, then a refund under the account holder's name will be issued for the difference. Once the 5 days have expired no refunds will be issued.

I, the undersigned, attest that I am the owner of the SunPass account(s) listed herein, accept the above terms and conditions and agree to take full responsibility for any and all consequences, financial or otherwise, that may result from failure to comply with the above terms.

Signature _____ Date: _____

Bay Harbor Islands Residents ONLY - Please update/add my information to the CodeRED Emergency Notification Database. YES! NO