



**FPL Home SurgeShield Program
Notification of Interest**

Name: _____

Address: _____

Phone: _____ Cell phone: _____

Email: _____

I am interested in enrolling in the FPL Home SurgeShield program. I understand that the monthly cost for this program will be determined based on the total number of Grand Isles homes that ultimately enroll in the program. The monthly cost could be \$9.95, \$8.95, \$7.95, or \$6.95, depending on how many households enroll.

Signing this form is not a binding agreement to enroll in the Home SurgeShield program. I understand that the Grand Isles Property Manager will contact me once a final monthly cost is determined.

Installation arrangements will be made by FPL.

Signature: _____

PLEASE EMAIL THIS COMPLETED/SIGNED FORM AT GRANDISLESMANAGER@GMAIL.COM OR DROP OFF AT THE OFFICE, AFTER HOURS, THIS CAN BE PLACED IN THE MAILBOX AT THE FRONT DOOR.