

OWNER INFORMATION FORM

Dear Owner:

From time to time changes occur in the status of owners, their families, or the unit itself. It is **extremely important** that we maintain the records of your Association accurately and up-to-date. If you have two addresses please denote which one is your primary and contact us if the primary changes.

COMMUNITY NAME Courtside Landings

UNIT OWNER INFORMATION (Legal Title Holder)

NAME _____ HOME PHONE _____
ADDRESS _____ WORK PHONE _____
Primary MAILING ADDRESS _____ CELLULAR PHONE _____
_____ Email _____

Secondary address (if applicable):

ADDRESS _____

PET INFORMATION

TOTAL NUMBER OF PETS _____ Number of Dogs _____ Number of Cats _____

EMERGENCY INFORMATION

NAME OF PERSON TO CONTACT _____
RELATIONSHIP _____ TELEPHONE _____
NAME OF ALARM COMPANY _____ TELEPHONE _____
YOUR KEY CAN BE OBTAINED FROM _____
SPECIAL MEDICAL INFORMATION (Oxygen, wheelchair, blind, deaf, etc.) _____

VEHICLE & PARKING INFORMATION

MAKE & MODEL CAR _____ YEAR _____ LICENSE # _____
MAKE & MODEL CAR _____ YEAR _____ LICENSE # _____
MAKE & MODEL CAR _____ YEAR _____ LICENSE # _____

TENANT INFORMATION (please provide us with a copy of the lease for our records)

NAME _____ LEASE EXPIRATION DATE _____
Telephone _____

SIGNATURE _____ DATE _____

PRINT NAME _____