

In order to update the Association's records, we would appreciate your taking a few minutes to complete this questionnaire and return it to us as as soon as possible. All information you provide is confidential.

PLEASE PRINT ALL INFORMATION

Date :

Property Address :

City : State : Zip :

****ALL INFORMATION BELOW SHOULD BE COMPLETED IN ITS ENTIRETY
(MUST BE LIGIBLE) IF NOT APPLICABLE NOTE N/A****

Homeowner Last Name : Home Phone :

Homeowner First Name : Work Phone :

Email Address : Cell Phone :

Homeowner Last Name : Home Phone :

Homeowner First Name : Work Phone :

Email Address : Cell Phone :

OCCUPANCY

How many individuals occupy this unit? :

What are their names? :

INSURANCE INFORMATION:

(Please submit a copy of your homeowner's insurance policy's declarations page along with this form)

Insurance Carrier Name : Policy No. :

Note: Owner must supply copy of insurance policy first of every year.

NON-OWNER OCCUPANT INFORMATION (If applicable), Relationship to Owner:

Name(s) :

Home Phone : Work Phone : Cell Phone :

PET INFORMATION

Cat Dog (Limit 2)

Breed : Name : Color : Weight :

Breed : Name : Color : Weight :

Note: Are all Pets current on shots? Yes No



AUTOMOBILE INFORMATION:

Make :	<input type="text"/>	Year :	<input type="text"/>	Model :	<input type="text"/>	Color :	<input type="text"/>	License Plate :	<input type="text"/>
Make :	<input type="text"/>	Year :	<input type="text"/>	Model :	<input type="text"/>	Color :	<input type="text"/>	License Plate :	<input type="text"/>
Make :	<input type="text"/>	Year :	<input type="text"/>	Model :	<input type="text"/>	Color :	<input type="text"/>	License Plate :	<input type="text"/>
Make :	<input type="text"/>	Year :	<input type="text"/>	Model :	<input type="text"/>	Color :	<input type="text"/>	License Plate :	<input type="text"/>

Note: List additional vehicles on the back of this form.

Vehicle Sticker	:	#	<input type="text"/>	#	<input type="text"/>
Guest Passes/Limit 2	:	#	<input type="text"/>	#	<input type="text"/>

EMERGENCY CONTACT INFORMATION

Name(s)	:	<input type="text"/>	Relationship :	<input type="text"/>	
Home Phone :	<input type="text"/>	Work Phone :	<input type="text"/>	Cell Phone :	<input type="text"/>

It is your responsibility to obtain copies of Surrey Park Octominiums By-Laws and Rules and Regulations. They can be obtained from Nex-Gen Real Estate's website.

ADDITIONAL INFORMATION:

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Signature _____

Date _____