

Vintage Oaks Condo Information Sheet

Unit Number: _____ Unit Type: 1,2,3 Owner Occupied Y/N Rental Y/N
Number of Occupants: _____
Number and Approximate Weight of Pets: Dogs: _____ Cats: _____

Do you have a copy of the CC&R's & Rules? Y/N

Section 1. On-Site Owner(s) OR Resident(s) Information

Adult Resident(s) Names(s): _____

Resident(s) E-mail Address (s): _____

Resident(s) Home Telephone
Number: _____

Resident(s) Work Telephone Number: _____

Resident(s) Cell Telephone Number(s): _____

Section 2. Resident(s) Vehicle(s) Information

Vehicle1 Make and Model: _____

Vehicle 1 Year: _____ Vehicle 1 Color: _____ Vehicle 1 Licensed State: _____

Vehicle 1 License Plate Number: _____

Vehicle2 Make and Model: _____

Vehicle 2 Year: _____ Vehicle 2 Color: _____ Vehicle 2 Licensed State: _____

Vehicle 2 License Plate Number: _____

Emergency Contact Person: _____

Emergency Contact Person Telephone Number: _____

Section 3. Off-Site Owner(s) Information

Owner(s) Name(s): _____

Owner(s) Home Address: _____

Owner(s) E-mail Address: _____

Owner(s) Home Telephone Number: _____

Owner(s) Work Telephone Number(s): _____

Owner(s) Cell Telephone Number(s): _____

Owner(s) Work Telephone Number(s): _____

I certify the above information is true and complete:

Signature

Date

If additional space is needed, please use the back of this form.