

EMERGENCY CONTACT INFORMATION FORM

In order to assist in managing emergencies and to provide timely communication, please complete and return it to: **CRANE'S LANDING CONDOMINIUM TRUST, 65 Alcott Circle, Taunton, Massachusetts 02780**. Completed forms may also be placed in the metal drop box located in the mail room.

Unit Owner(s): _____

Mailing Address: _____

Unit #: _____ Home Phone: _____ Cell Phone: _____

Work Phone: _____ E-mail: _____

Emergency Contact Name: _____

Home Phone: _____ Work Phone: _____

Is the "contact" person authorized to make decisions on your behalf? Yes No

If the unit is not owner occupied please provide the following additional information:

Tenant's Name(s): _____

Tenant's Home Phone: _____ Cell Phone: _____

Work Phone: _____ E-mail: _____

Vehicle Information:

Vehicle #1 Make and Model: _____ **Vehicle #2** Make and Model: _____

Color and Year: _____ Color and Year: _____

License Plate Number: _____ License Plate Number: _____

Vehicle Information:

Vehicle #3 Make and Model: _____ **Vehicle #4** Make and Model: _____

Color and Year: _____ Color and Year: _____

License Plate Number: _____ License Plate Number: _____

Do you own any pets? If so, please describe (include name and license):

If any of the above listed information changes, please complete a new form.