

Avalon of Orange County Condominium Association, Inc.

RESIDENT INFORMATION UPDATE FORM

In order to keep the HOA records current, to prevent any unnecessary violations, and to maintain an active access card, please complete the following should ANY of your information change. Please return completed form via drop box, fax, email, etc. Should you need any assistance in completing this form, please stop in the HOA office and one of the staff will be happy to help.

BUILDING:UNIT:						DATE:		
1.	Las	st Name:				_First Na	me:	
	Em	ail:						
	Cell Phone:				_Home Phone:			
-	-	unless the veh	icle regist	ration i	s in the t	enant's	egistration in order to obtain a new decal. Please name, you will have to provide a notarized letter hom the vehicle is registered.	
			Addit	tional 1	Tenants	/Reside	nts (including minors)	
2.	Last Name:					First Name:		
	Em	ail:						
	Cell Phone:					_Home Phone:		
3.	Last Name:				_First Name:			
	Em	ail:						
	Cell Phone:				_Home Phone:			
	PLEASE CONTINUE ON BACK OF PAGE SHOULD YOU NEED ADDITIONAL SPACE							
					Pe	et inform	ation	
	1)	Type of Pet:		DOG	CAT	BIRD	OTHER	
							_Breed:	
		(must pro	ovide curre	ent vaco	cination	records	no more than one year since last vaccinations)	
	2)						OTHER	
		Age:	Weight:		_Color:_		_Breed:	