

Torrington Farms Association, Inc.

c/o REI Property Management, Inc.

OWNER INFORMATION

Please return to: REI Production at production@rei-pm.net or mail to REI – Management Office

Name(s): _____ Unit # _____

Mailing Address: _____

Email Address(s): _____

- Your association would like to use e-mail as the preferred method of communication to all owners. The use of email will save your association money. Further, email allows REI to provide time-sensitive association information to Owners as quickly as possible. Your address will not be shared or sold to solicitors.

Home Phone # _____ Cell Phone # _____

Emergency Contact (not living at unit):

Name: _____ Phone # _____

TENANT INFORMATION

Tenant 1 Name: _____ Unit # _____

Tenant 2 Name: _____ Unit # _____

Address: _____

Best Contact # _____ This is for emergency purposes only in most cases the owner will be contacted first.

Emergency Contact (not living at unit):

Name: _____ Phone # _____

OCCUPANT VEHICLE INFORMATION

Car #1

Year _____ License Plate # _____ Make _____

Model _____ Color _____

Car # 2

Year _____ License Plate # _____ Make _____

Model _____ Color _____

Car # 3

Year _____ License Plate # _____ Make _____

Model _____ Color _____

Car # 4

Year _____ License Plate # _____ Make _____

Model _____ Color _____

PET INFORMATION

Pet Registration: *NOTE this information is REQUIRED!**

All pets must be registered with the Board of Directors/Property Management. Dogs must be licensed with the Town of Torrington per local statutes and all pets should be immunized as appropriate for their health and wellbeing.

Pet Owner: _____

Best Contact Number: _____ Cell – Work – Home (circle)

Dog: _____ Cat: _____ Other: _____

Breed: _____ Color: _____

Additional Information:

Dog License #: _____

Please submit a photo of the animal. Photo can be emailed to production@rei-pm.net or a printed photo can be mailed with this form.

FOR REI OFFICE USE ONLY:	
Date received: _____	Received by: _____
Updated Information:	
<input type="checkbox"/> Owner Name <input type="checkbox"/> Address <input type="checkbox"/> Occupant <input type="checkbox"/> Email <input type="checkbox"/> Phone <input type="checkbox"/> Family <input type="checkbox"/> Emergency Contact <input type="checkbox"/> Vehicle <input type="checkbox"/> Water Heater <input type="checkbox"/> Pet Info <input type="checkbox"/> Pet Photo uploaded	
Date updated: _____	Completed by: _____
Date scanned and filed on Caliber: _____	