

TENANT INFORMATION SHEET 2021

LOT ADDRESS: _____ **EMAIL ADDRESS:** _____

ADULTS _____ **# PERSON(S) UNDER 18** _____ **PETS** _____ **DOG** _____ **CAT** _____

OCCUPANTS LAST NAME	FIRST NAME	DOB	RELATION	DATE OF OCCUPANCY
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1

2

3

4

5

6

PLATE #:	COLOR:	VEHICLE MAKE:	VEHICLE MODEL:	YEAR:
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1

2

3

PET NAME:	BREED/DESCRIPTION:	COLOR:	AGE:	DATE ACQUIRED:
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1

2

3

4

RENTERS FILL OUT SECTION BELOW:	CONTACT INFORMATION:
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ELECTRICITY ACCOUNT #:	PRIMARY PHONE: TEXT ENABLED <input type="checkbox"/>
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FUEL SERV. ACCOUNT #:	SECONDARY PHONE: TEXT ENABLED <input type="checkbox"/>
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RENTER'S INSURANCE POLICY #:	E-MAIL:
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INSURED BY:	EMPLOYER'S NAME:
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AGENT'S NAME:	EMPLOYER'S ADDRESS:
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AGENT'S NUMBER:	EMPLOYER'S PHONE:
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HOMEOWNERS FILL OUT SECTION BELOW:	EMERGENCY SECTION
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HOME PURCHASED FROM:	CONTACT NAME <small>(DOES NOT RESIDE IN HOME):</small>
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HOME PURCHASE DATE:	ADDRESS:
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HOME PURCHASE PRICE:	PHONE: TEXT ENABLED <input type="checkbox"/>
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MAKE OF HOME:	EMAIL:
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SIZE OF HOME:	DOCTOR APPROVED LIFE SUPPORT REQUIRED <input type="checkbox"/>
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YEAR OF HOME:	ADDITIONAL NOTES:
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# OF BEDROOMS:	
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# OF BATHROOMS:	
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SERIAL NUMBER	
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ELECTRICITY ACCOUNT #:	
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HOME OWNERS INSURANCE POLICY#:	
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INSURED BY:	
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AGENTS NAME:	
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AGENTS PHONE NUMBER:	
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PRINTED NAME:	
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SIGNATURE:	DATE:
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IF ANY OF THE INFORMATION ON THIS FORM IS FALSE, (I/WE) AGREE THAT THE LANDLORD HAS THE RIGHT TO EVICT ENTIRE FORM MUST BE COMPLETED (LEAVING NO BLANK SPACES) AND RETURNED TO OUR LOCAL OFFICE ALONG WITH:

REQUIRED: 1) COPY OF YOUR CURRENT HOMEOWNER/RENTAL INSURANCE DECLARATION PAGE, 2) VEHICLE REGISTRATION AND 3) INSURANCE CARD, AND 4) TITLE.

ALL RESIDENTS OF THE PARK MUST MAKE AN APPOINTMENT TO TAKE THEIR ANNUAL PICTURE AT OUR SALES OFFICE. THIS INCLUDES ALL CHILDREN AND PETS.