APM MANAGEMENT

Educated Board Members Make Better Decisions

HOMEOWNER INFORMATION FORM

Please provide the information listed below for our records. It is important that we know how to contact you, especially in case of an emergency. Thank you.

Property Address (please include unit #)			Unit
Homeowner Name(s)			
Mailing Address (if different fr above)			
City / State / Zip			
Is this unit rented?	Yes	No	If you checked this box, please complete the Tenant Information Form.

PHONE NUMBERS & EMAIL ADDRESSES

Name1	Name2
Cell1	Cell2
Email1	Email2
Other1	Other2

EMERGENCY CONTACT INFORMATION

In the event of a property-threatening emergency, please provide contact information for a tenant, friend, relative or neighbor in the area *who has access to your unit*. This information will not be distributed and is intended for use by the management company only.

Name1		Name2	
Phone1		Phone2	
Email1		Email2	
	Is this person a tenant in the unit? YES NO		Is this person a tenant in the unit? YES NO

PLEASE RETURN COMPLETED FORMS TO VANDA@ADOREPM.COM

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HOMEOWNER COMMUNICATION PREFERENCES

YES NO **EMAIL COMMUNICATIONS.**

I would like for the association's primary means of communication with me to be electronic at all times and for all documents. I understand that I can revoke this request at any time in writing and that it must be delivered to the management company either via email or US Post. (Calif Civil Code §5220).

YES NO **OPT-OUT OF MAILING / EMAIL LIST.**

A member of the association may opt out of the sharing of his or her name, property address, and mailing address by notifying the association in writing that he or she prefers to be contacted via the alternative process described in subdivision (c) of <u>Section 8330</u> of the Corporations Code. This opt-out shall remain in effect until changed by the member. (Civ. Code §5220).

INTERCOM LISTING

Name on		
Intercom	Phone No.	

AUTOMOBILE REGISTRATION

Parking Spaces	
Make	License Plate
Model	Car Color
Make	License Plate
Model	Car Color

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