## OWNER / OCCUPANT(S) INFORMATION REQUEST TOWNE PROPERTIES

Please complete the information below and return to Towne Properties.

Unit A	ddress:			
Occupa	ant(s) Name, if different	from Owner:		
Occupa	ant(s) Relationship to O	wner:		
Phone	Contact Information:			
Owner: Home Phone:			Cell:	
Occupant: Home Phone: Co			Cell:	
Email(s	s) (Optional: for use only	y by office and Bo	pard):	
Do you	ı authorize the Board to	distribute inform	nation using your email?	res O No O
Owner	:		Occupant:	
EMERO	GENCY CONTACT (Respo	nse is optional)		
Name:			Phone Numb	oer:
Name:		Phone Numb	Phone Number:	
DO VO	U HAVE PET(S)? (Option	al) ○ Yes ○ No		
DO YO				
DO YO	If yes, how many?			
DO YO				
		s)?		
	What breed(s	;)? ve? (Optional)		 License Plate #
How m	What breed(s	;)? ve? (Optional) Model:	Color:	

Please return completed form to:

Towne Properties 777-A Dearborn Park Ln Worthington, OH 43085 (P) 614 781-0055 (F) 614 781-0832