

## HOMEOWNER/RESIDENT INFORMATION FORM

Date: \_\_\_\_\_

Unit# \_\_\_\_\_

Owner Name(s): \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Alt Phone \_\_\_\_\_

Owner Email(s): \_\_\_\_\_

**Email Opt-In\*** Yes \_\_\_\_\_ No \_\_\_\_\_

\*By opting in, you agree to receive Association notifications and informational emails for your community from the 4<sup>th</sup> Avenue Village management company and your Association.

**Owner's Mailing Address:**

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Owner Vehicle Information:**

Make & Model: \_\_\_\_\_ License# \_\_\_\_\_

Make & Model: \_\_\_\_\_ License# \_\_\_\_\_

**Pet Information:**

Name of Pet: \_\_\_\_\_ Breed: \_\_\_\_\_ Age: \_\_\_\_\_

Name of Pet: \_\_\_\_\_ Breed: \_\_\_\_\_ Age: \_\_\_\_\_

**Rental-Tenant Information:**

Lease Start Date: \_\_\_\_\_ Lease End Date: \_\_\_\_\_

Tenant Name(s): \_\_\_\_\_ Cell Phone: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_ Alt Phone: \_\_\_\_\_

**Tenant Vehicle Information:**

Make & Model: \_\_\_\_\_ License# \_\_\_\_\_

Make & Model: \_\_\_\_\_ License# \_\_\_\_\_

**Tenant- Pet Information:**

Name of Pet: \_\_\_\_\_ Type: \_\_\_\_\_ Breed: \_\_\_\_\_ Age: \_\_\_\_\_

**Owner Emergency Contact Information:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**PLEASE RETURN THIS FORM TO:**

4th Avenue Village Board

Drop off in the black mailbox inside the clubhouse OR

Email: [theboard.4thavenue@gmail.com](mailto:theboard.4thavenue@gmail.com)