

2023 CUSTOMER PROFILE (TIS)

LOT ADDRESS:		EMAIL ADDRESS:		
#ADULTS _____	#PPL UNDER 18 _____	#PETS _____	#DOG _____	#CAT _____
Occupants:	Last Name, First Name	DOB	RELATION	TEN/RES/OCC/GUEST
1:				
2:				
3:				
4:				
5:				
6:				
COLOR:	YEAR:	VEHICLE MAKE:	VEHICLE MODEL:	PLATE #:
PET NAME:	WEIGHT/COLOR/BREED:	DOB:	DATE ACQUIRED:	ESA CERTIFIED:
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
UTILS + INS		CONTACT INFORMATION:		
ELECTRICITY ACCOUNT #:		PRIMARY PHONE:		TEXT ENABLED <input type="checkbox"/>
FUEL SERV. ACCOUNT #:		SECONDARY PHONE:		TEXT ENABLED <input type="checkbox"/>
INSURANCE POLICY #:		E-MAIL:		
INSURED BY:		EMPLOYER'S NAME:		
AGENT'S NAME:		EMPLOYER'S ADDRESS:		
AGENT'S NUMBER:		EMPLOYER'S PHONE:		
RESIDENT?	Y or N	IN CASE OF EMERGENCY I.C.E.		
HOME PURCHASED FROM:		CONTACT NAME (DOES NOT RESIDE IN HOME):		
DATE:		ADDRESS:		
PRICE:		PHONE: TEXT ENABLED <input type="checkbox"/>		
MAKE OF HOME:		EMAIL:		
SIZE OF HOME:		DOCTOR APPROVED LIFE SUPPORT REQUIRED <input type="checkbox"/>		
YEAR OF HOME:				
# OF BEDROOMS:				
# OF BATHROOMS:				
SERIAL NUMBER:				
ENTIRE FORM MUST BE COMPLETED (LEAVING NO BLANK SPACES) AND RETURNED TO OUR LOCAL OFFICE ALONG WITH:				
CURRENT INSURANCE DEC PAGE				
CURRENT VEHICLE REGISTRATION				
CURRENT VEHICLE INSURANCE				
COPY OF TITLE				
<small>ALL RESIDENTS OF THE PARK MUST MAKE AN APPOINTMENT TO TAKE THEIR ANNUAL PICTURE AT OUR SALES OFFICE. THIS INCLUDES ALL CHILDREN AND PETS.</small>				
<small>IF ANY OF THE INFORMATION ON THIS FORM IS FALSE, (I/WE) AGREE THAT THE LANDLORD HAS THE RIGHT TO EVICT</small>				
<input type="checkbox"/> THERE HAVE BEEN NO CHANGES TO MY TENANT INFORMATION SINCE				
SIGNATURE:		DATE:		

