REFLECTION LAKES, CONDO 1

FAMILY MEMBER UNIT REGISTRATION WHEN UNIT OWNER IS NOT PRESENT

Date:
Dates of Occupancy: From To:
(Occupancy longer than 30 days requires a background check for those over 18)
Building # and Unit #
Name of Unit Owner:
Name of Family Member Using Unit:
Relationship to Unit Owner:
Permanent Address of Family Member using the unit:
Additional Occupants Name and age:
Vehicle Info: Reg #, State, Color:
(Attach photocopy of driver's license.)
Cell # & email (for emergency purposes) of family member occupying unit:
I attest that I have read and agree to follow all Rules and Regulations of Condo1.
Signed
Print name