

Sea Country Community Association
CONFIDENTIAL
PERSONAL DATA CARD

LOT NO. _____ OWNER EMAIL ADDRESS _____

OWNER RESIDENT
NAME _____ NAME _____
ADDRESS _____ ADDRESS _____

CONTACT PHONE # _____ PHONE NO. _____
AUTOMOBILE _____ AUTOMOBILE _____
YEAR-MAKE-MODEL _____ YEAR-MAKE-MODEL _____
LICENSE NO. _____ LICENSE NO. _____

RECEIPT OF HOUSE RULES: YES NO RENTAL AGENT
PET: YES NO NAME _____
TYPE _____ ADDRESS _____
DESCRIPTION _____ PHONE NO. _____

RECEIPT OF HOUSE RULES

SIGNATURE

NOTE: All owners, rental agents, and residents are obligated to abide by the House Rules at all times. Prompt action will be taken for any violations of these rules.

Persons to reside in Unit, other than named above. (Age if under 18)

NAME _____	NAME _____
NAME _____	NAME _____
NAME _____	NAME _____

In Case of Emergency Call:

_____	Relationship _____	Phone No. _____
-------	--------------------	-----------------

NOTE: This card will be maintained by the Resident Manager and used for Emergency and Property Management purposes only. IF ANY RESIDENT NEEDS SPECIAL CARE IN THE EVENT OF AN EMERGENCY, PLEASE MAKE A NOTE NEXT TO THE PERSON'S NAME

INTERNAL USE ONLY BELOW THIS LINE

ID CARD # _____	ID CARD # _____
ID CARD # _____	ID CARD # _____
ID CARD # _____	ID CARD # _____
ID CARD # _____	ID CARD # _____