

SPRUCE HILLS CONDOMINIUM ASSOCIATION

UNIT #:

OFF-SITE OWNERS INFORMATION

OWNERS NAME: \_\_\_\_\_

CO-OWNER NAME: \_\_\_\_\_

*Must be listed on Deed or Mortgage*

SPOUSE/PARTNER: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

PRIMARY PHONE: \_\_\_\_\_ \*

Alt. Phone - 1: \_\_\_\_\_

\* Spruce Hills Condo Association **MUST** be able to reach it's owners & tenants from time to time. Please ensure this number will enable us to reach out to you **to the greatest extent possible**.

Alt. Phone - 2: \_\_\_\_\_

Alt. Phone - 3: \_\_\_\_\_

email - 1: \_\_\_\_\_

email - 2: \_\_\_\_\_

**UNIT TYPE:**

1 Bedroom

2 Bedroom

3 Bedroom

1 Bedroom w/Den

2 Bedroom w/Den

**BATHROOMS**

DOES THE UNIT HAVE A GARAGE? YES NO

1 1 ½ 2

DOES THE UNIT HAVE A FIREPLACE? YES NO

<input type="text"/>	<input type="text"/>	<input type="text"/>
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DOES THE OFFICE HAVE A COPY OF YOUR KEY? YES NO

ARE YOU WAIVING THE RIGHTS FOR THE USE OF THE POOL SO THAT YOUR TENANT MAY USE IT? YES NO

Primary Emergency Contact: \_\_\_\_\_

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

Alt. Phone: \_\_\_\_\_

Secondary Emergency Contact: \_\_\_\_\_

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

*preferred but not required*

Alt. Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

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