

**VILLAGE OF DORAL GREENS HOMEOWNERS ASSOCIATION, INC
OCCUPANT INFORMATION UPDATE SHEET**

The information requested is needed in order to update the current information on file with the Association. This information is confidential and will only be made available to the Board of Directors and Allied Property Group, Inc. If you own more than one unit, please complete one occupant information update sheet per unit.

PLEASE COMPLETE AND SEND BEFORE TO

By e-mail: nlovera@alliedpropertygroup.net

By fax: (305) 969-0154

Or leave with the security guard at the guardhouse during the day

OWNER OCCUPIED / RENTAL (Please circle one)

PRIMARY OWNER INFORMATION:

LAST NAME: _____ FIRST NAME _____ INITIAL _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: HOME # () _____ WORK # () _____

CELL # () _____ EMAIL: _____

TENANT(S): (If homeowner is renting/leasing unit)

1. LAST NAME: _____ FIRST NAME _____ INITIAL _____

PHONE: HOME # () _____ WORK # () _____

CELL #: () _____ EMAIL: _____

2. LAST NAME: _____ FIRST NAME _____ INITIAL _____

PHONE: HOME # () _____ WORK # () _____

CELL #: () _____ EMAIL: _____

CHILDREN: (complete if applicable)

NAME: _____ SEX _____ AGE: _____

NAME: _____ SEX _____ AGE: _____

NAME: _____ SEX _____ AGE: _____

OTHER FAMILY MEMBERS LIVING IN THE UNIT: (complete if applicable)

NAME: _____ SEX _____ AGE: _____ RELA: _____

NAME: _____ SEX _____ AGE: _____ RELA: _____

NAME: _____ SEX _____ AGE: _____ RELA: _____

VEHICLES:

1. MAKE: _____ MODEL: _____ YEAR: _____

TAG #: _____ STATE: _____ COLOR: _____ DECAL # _____

2. MAKE: _____ MODEL: _____ YEAR: _____

TAG #: _____ STATE: _____ COLOR: _____ DECAL # _____

3. MAKE: _____ MODEL: _____ YEAR: _____

TAG #: _____ STATE: _____ COLOR: _____ DECAL # _____

SIGNATURE: _____ DATE: _____