HILLCREST BAY, INC HOMEOWNER ASSOCIATION HOMEOWNER INFORMATION

Name of Homeowner(s):			Lot#		
Property Address:					
	e your Lot# of the propert				
Mailing Address:	MAILING ADDRESS TO WHI				
	Stata:				
City	State	Zip Code	r none	Cell:	
ALTERNATIVE/SE	CONDARY MAILING ADDRES	SS (IF ANY) TO WHICH YOU	UWANT THE ASSOCIATION	ON'S NOTICES DELIVERED	
Alternate/Secondary A	Address:				
City:	State:	Zip Code:	Phone:	Cell:	
LEGAL REPR	RESENTTIVE OR AUTHORIZE	D INDIVIDUAL TO BE CON	TRACTED IN THE EVENT	COF AN EMERGENCY	
Name:					
Mailing Address:					
City:	State:	Zip Code:	Phone:	Cell:	
	STATUS OF	YOUR ASSOCIATION PROP	PERTY (check one)		
Ow:	ner-Occupied	_Rented	Vacant U	Jndeveloped Land	
	n owner and/or trustee of ate, and that I am authori			identified above, that the alf of all owners of this	
	ereby appoint and designate(lot owner name) as the voting member for lot#_ ned by the undersigned.				
Date:	Phone:	Email:			
Signature:	ignature: Print Name:				
	RETURN 1	O: HILLCREST BAY	, INC., 924 BAYVIEW	DRIVE, PARKER, AZ 853	
			OR E-MAIL T	O: accounts@hillcrestbay.co	

Website address is www.hillcrestbay.com