## HILLCREST BAY, INC HOMEOWNER ASSOCIATION HOMEOWNER INFORMATION

Name of Homeowner(s):			Lot#		
Property Address:					
NOTE: Please incl	lude your Lot# of the prope	erty you own: one (1) form	should be completed	l per each lot owned.	
	MAILING ADDDESS TO WI	HICH YOU WANT THE ASSOC	IATION'S NOTICES DEI I	NEDEN .	
Mailing Address:					
	Stata				
City	State.	Zip Code	rnone	Cell:	
ALTERNATIVE	SSECONDARY MAILING ADDR	ESS (IF ANY) TO WHICH YOU	WANT THE ASSOCIATION	DN'S NOTICES DELIVERED	
Alternate/Secondar	ry Address:				
				Cell:	
LEGAL R	EPRESENTTIVE OR AUTHORIZ	ZED INDIVIDUAL TO BE CONT	TRACTED IN THE EVENT	OF AN EMERGENCY	
Name:					
City:	State:	Zip Code:	Phone:	Cell:	
	STATUS O	F YOUR ASSOCIATION PROPI	ERTY (check one)		
(	Owner-Occupied	Rented V	vacantU	Jndeveloped Land	
I declare that I am	an owner and/or trustee o	f the trust that owns the 2	Association property	identified above, that the	
	urate, and that I am autho rty.			alf of all owners of this	
	ry. nd designate			a member for lot#	
owned by the unde		(tot own	er name) as the voting	g member for totm	
Date:	Phone:	Email: _			
Signature:		Print Name:			
				DRIVE, PARKER, AZ 8534	

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Website address is www.hillcrestbay.com

OR E-MAIL TO: accounts@hillcrestbay.com