

**HARBOUR MANSION CONDOMINIUM ASSOCIATION  
CONFIDENTIAL RESIDENT INFORMATION**

Do you reside-at Harbour Mansion year round? **Yes -No**  
If no, please provide your off season address:

Name: \_\_\_\_\_  
Unit No. \_\_\_\_\_

**UNIT INFORMATION:** Please list all owners and residents below and include all numbers where we can reach you. This information is vital in case of an emergency.

Name	Home Phone	Work Phone	Cell Phone	E-Mail Address
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Current Homeowners Insurance Company and Address: \_\_\_\_\_  
Do we have a key to your unit? **Yes No**. If no, who locally has a copy of your key?  
Name/Phone \_\_\_\_\_

**PARKING INFORMATION:** Please list all vehicles owned by the residents of your home.

Make/Model	Year	Color	License Plate
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do you have a garage space? **Yes No** If Yes, space number \_\_\_\_\_

**Emergency Numbers:** Please list two people you would like us to contact in an emergency if we are unable to contact you.

Name	Home Phone	Work Phone	Cell Phone
_____	_____	_____	_____
_____	_____	_____	_____

**LEASE INFORMATION:** If you have tenants, please list them below. Please provide the Association with a copy of a current lease. Please remember that you are required to provide the Association with your lease and all fees well in advance of the tenant moving into the community.

Tenant Name	Home Phone	Work Phone	Cell Phone	E-Mail Address
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Tenant Emergency Numbers:** Please list two people your tenant would like us to contact in case of an emergency.

Name	Home Phone	Work Phone	Cell Phone
_____	_____	_____	_____
_____	_____	_____	_____

Lease Effective Date \_\_\_\_\_ .Lease Expiration Date \_\_\_\_\_

This information will be used to improve the service to the community. Phone numbers are vital in the event of an emergency. Mortgage information is necessary for any future document amendments. Even if you previously completed a census, kindly complete this one to help us keep your records current, Please help save both time and money by responding to all questions on this first request **PLEASE NOTIFY MANAGEMENT OF ANY CHANGES IN THE ABOVE INFORMATION.**

**FOR OFFICE USE ONLY**

Parking Permit #	Assigned to Vehicle	Access Card #	Pog #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____