

POTLATCH CIRCLE

Unit Number: _____

SELECT ONE: **Owner Occupied / Rented**

OWNER INFORMATION

If rented, do not list Endeavor address as mailing address

Name: _____

Home Phone: (_____) - _____

Mailing Address: _____

Cell Phone: (_____) - _____

Cell Phone: (_____) - _____

EMAIL: _____

Vehicle(s) - list additional vehicles on the back side of this form

Make: _____ Model: _____ Plate: _____ State: _____

Make: _____ Model: _____ Plate: _____ State: _____

Local Emergency Contact:

Name: _____

Phone: (_____) - _____

RENTER INFORMATION

Refer to the governing documents regarding rental requirements

Name: _____

Home Phone: (_____) - _____

Mailing Address: _____

Work Phone: (_____) - _____

Cell Phone: (_____) - _____

EMAIL: _____

Vehicle(s) - list additional vehicles on the back side of this form

Make: _____ Model: _____ Plate: _____ State: _____

Make: _____ Model: _____ Plate: _____ State: _____

Local Emergency Contact:

Name: _____

Phone: (_____) - _____

CORRESPONDENCE PREFERENCES

EMAILED STATEMENTS

YES / NO

EMAILED NEWSLETTERS/NOTICES

YES / NO