

RICHARDSON CROSSROADS OWNER/TENANT INFORMATION

Please complete and return to the Secretary. This information MUST be kept current for HOA emergency & communication purposes.

OWNER NAME \_\_\_\_\_ UNIT # \_\_\_\_\_

TENANT NAME \_\_\_\_\_

DAY PHONE # \_\_\_\_\_

Owner

Tenant

EVENINGPHONE # \_\_\_\_\_

Owner

Tenant

EMERGENCY/MOBILE # \_\_\_\_\_

Owner

Tenant

EMAIL \_\_\_\_\_

Owner

EMAIL \_\_\_\_\_

Tenant

NUMBER OF VEHICLES ON PROPERTY \_\_\_\_\_

TYPE OF VEHICLE \_\_\_\_\_ LICENSE # \_\_\_\_\_

\_\_\_\_\_ LICENSE # \_\_\_\_\_

\_\_\_\_\_ LICENSE # \_\_\_\_\_

DO YOU AUTHORIZE NAME, UNIT & PHONE # TO BE PUBLISHED IN THE RESIDENT DIRECTORY?

Owner: YES \_\_\_ NO \_\_\_

Tenant: Yes \_\_\_ No \_\_\_