

OVERLOOK CONDOMINIUM

Pet Registration and Information Questionnaire

Please complete this form and return to:
Overlook Pet Survey, PO Box 67, Jefferson, MD 21755
Or email to: admin@jeffersonpm.com

Owner(s) Name(s): _____ Unit Address: _____

This property is Owner occupied: Yes / No

This property is a Rental Unit: Yes / No

PET INFORMATION

There is no pet at the Unit Address:

Cat/Dog/Other Breed _____ Weight _____ Rabies Date _____ Age _____

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Cat/Dog/Other Breed _____ Weight _____ Rabies Date _____ Age _____

Additional information regarding pet(s) or additional pets:

As the property Owner, I am aware there is one or more pet residing in the Unit: Yes / N/A

My tenant has been given a copy of the Overlook Condominium By-laws Article X, Use Restrictions, Section 2, Prohibited Uses and Nuisances, paragraph (b) regarding the keeping of pets, the House Rules and Regulations, specifically paragraph 25 as well as Policy Resolutions Numbers 2, 4 & 8: Yes / No

By signing below, I acknowledge that I have verified the above information and it is accurate to the best of my knowledge.

Owner Signature: _____ **Date:** _____