CEDAR POINT COMMUNITY ASSOCIATION

C/O PERFORMANCE CAM, LLC

5135 Camino Al Norte, Suite 100, North Las Vegas, NV 89031 Telephone: 702.362.0318 Facsimile: 702.331.4188 Email: gerry@pcam.vegas

Resident Information Form

Have you submitted the 55+ Age Restr YES NO	iction Certification of Occupancy??
Are you in possession of a copy of (If no to either, please contact your community manager)	the CC&R's? YES NO
Owner Information:	
Name:	Date:
Property Address:	
Owner Mailing Address:	(If different from property address)
	Emergency:
☐ Please check if you would like to	receive E-Statements. (Additional actions may be required)
☐ Please check if you would like to	receive Email notifications (Must provide email address)
E-mail Address:	
Property Manager (If applicable)	
Company Name:	Contact Number:
Managers Address:	
	Is authorized to contact Performance CAM, LLC
(Authorized Contact Name) for all matters regarding this prope	erty.
Tenant Information: (If applicable)	
Name(s):	Others names
55+ Resident name	Others names
Phone Number(s): Primary:	Emergency:
DO NOT WRIT	TE BELOW THIS LINE. Official Use Only
DATE ENTERE	D: INITIALS:

