COMMUNITY: Desert Ridge Place HOA ADDRESS:

CONTACT DATA

Please complete the following information.

HOMEOWNER INFORMATIO	N	Plea	se omit my i	name and n	umber from	the Direct	tory
Homeowner Names							
Home Telephone #				Work#			
E-mail:				_			
Mailing Address:							
Mailing Address: (if different from above#)							
2nd Home Address: (if applicable)							
2nd Home Telephone #s: Times of Year at 2nd Home:							
IN CASE OF BUILDING EMER	RGENCY IN M	Y ABSENCE,	CONTACT:	(SHOULD HAVE	KEYS)		
#1 Name:				_	Phone#	s:	
#2 Name:				Phone#s:			
TO BE COMPLETED IF YOUR	HOME IS OC	CUPIED BY A	TENANT:				
Name:				Work	#		
nome #					#		
Management Agent:	Telephone:				Emerg #		
HOUSEHOLD PET INFORMA	TION:						
Pet #1 Pet #2 Pet #3 Pet #4		Breed		Height	Weight	Color	Age
VEHICLE INFORMATION:							
Vehicle #1 Vehicle #2 Vehicle #3 Vehicle #4	License		Make		Model		Color
SPECIAL NEEDS:	Please make us aware of any special needs you may have in the event of a property emergency.						
		PLEASE RE	TURN TO:				