

Montego Cove Condominium Association

RESIDENT INFORMATION

Please complete and return to the Clubhouse Office

(THIS FORM IS FOR OFFICE USE ONLY)

RESIDENT ONE: _____ Date of Birth: _____

RESIDENT TWO: _____ Date of Birth: _____

RESIDENT, OTHER: _____ Date of Birth: _____

(Relationship)

Pet Type: _____ Color: _____ Vac. Rec.: _____ Tag#: _____ Name: _____

Year Round Resident: Seasonal: Owner: Renter:

MC Address: _____
(Street number) (Unit number) (Street name)

Alternate Address: _____
(Out of State address for seasonal owners)

Home Phone: _____ Cell #: _____ email: _____

Car #1 Make: _____ Year: _____ License #: _____

Car #2 Make: _____ Year: _____ License #: _____

If seasonal do you leave your car here? Yes No Who has your key? _____

Does a neighbor have a key to your unit? Yes No Who has your key? _____

EMERGENCY CONTACT:

Name: _____ Relationship: _____

Address: _____ Home Phone: _____

Alternate Phone: _____

FOR RENTERS:

Name of Owner: _____ Home Phone: _____

Address: _____ Alternate Phone: _____

Lease Dates (from): _____ (to): _____

Prepared by: _____ Date: _____
(Signature)

Note: In order to maintain our 55+ Age Restricted Community status, a copy of your Driver's License, State I.D. or Passport showing Proof of Age is required to be kept on file. Please make arrangements to get this information to the Montego Cove Clubhouse Office as soon as possible.

July 1, 2019