



In accordance with the Community Handbook of Horizons, all Owners are required to provide a copy of the Governing Documents prior to the leasing of the Owner's Condominium(s). Any lease or rental agreement must be in writing between the parties and must state that the Lease is subject to the Governing Documents. Failure by the Owner to provide such Governing Documents shall be a breach under the Declaration.

## CONFIDENTIAL RESIDENT INFORMATION FORM

Please complete and return the following information to the Management Office

UNIT: \_\_\_\_\_  SOUTH or  NORTH |  OWNER or  TENANT

### RESIDENTS INFORMATION

(1) FIRST NAME: \_\_\_\_\_  
 LAST NAME: \_\_\_\_\_  
 CELL PHONE: \_\_\_\_\_  
 HOME/ALT PHONE: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_  
 CALLBOX NUMBER  CELL or  HOME  
**\*EVACUATION ASSISTANCE\***  YES or  NO

(2) FIRST NAME: \_\_\_\_\_  
 LAST NAME: \_\_\_\_\_  
 CELL PHONE: \_\_\_\_\_  
 HOME/ALT PHONE: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_  
 CALLBOX NUMBER  CELL or  HOME  
**\*EVACUATION ASSISTANCE\***  YES or  NO

\*EVACUATION ASSISTANCE - By marking "Yes" you are requesting assistance from emergency response personnel to evacuate the building due to medical reasons.

### VEHICLE INFORMATION

	VEHICLE 1	VEHICLE 2
MAKE		
MODEL		
COLOR		
LICENSE PLATE		
DECAL PERMIT #		

### AUTHORIZED GUESTS

Please list those people who are to be granted access to the property without a prior call to your home (for example, family or domestic help). Please note that entry to the building will still require your guest to use the entry phone system or use a fob. Please file any future additions to this list with Management.

FIRST/LAST NAME	RELATIONSHIP
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

<b>EMERGENCY CONTACT #1:</b>	Name:	Phone #1:
	Relationship:	Phone #2:
<b>EMERGENCY CONTACT #2:</b>	Name:	Phone #1:
	Relationship:	Phone #2: