

WINFIELD ARMS CONDOMINIUMS

Resident Information Form

Please provide the required Owner and Tenant or Guest Information:

Owner Name: _____
(First, Last)

Unit #: _____

Phone Number(s): _____

Email Address(s): _____

Emergency Contact Information: _____

1. Tenant or Guest Name: _____

Phone Number: _____

Email Address: _____

Emergency Contact Information: _____

2. Tenant or Guest Name: _____

Phone Number: _____

Email Address: _____

Emergency Contact Information: _____

Lease Agreement

Start Date: _____

End Date: _____

If written, attach a copy with this form.

If not written, describe lease terms: _____

Parking for Tenant or Guest

Space Number: _____

Garage Door Opener: Yes _____ No _____

Vehicle License Plate Number: _____ State: _____

Vehicle Make/Model: _____ Vehicle Color: _____

Bicycles

Yes _____ No _____

Make: _____ Color: _____

Pet

Yes _____ No _____

Type: _____ Name: _____

Male/Female: _____

Attestation By Owner

I hereby attest that the foregoing information is true and correct to the best of my knowledge.

If the occupancy is for an immediate family member or a close personal friend (“Guest”), I hereby attest that the relationship between the Owner and the Guests is as follows:

If the occupancy is for a Guest, I hereby attest that the Owner is not receiving any compensation of any kind, in money or other thing of value, directly or indirectly, in return for allowing Guest to use the Owner’s Unit.

Owner Name (First, Last): _____

Signature: _____

Date: _____

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Affidavit of Receipt of Rules & Regulations for Winfield Arms Form

1. Tenant or Guest Name:

(First, Last) _____

Unit Number: _____

Occupancy Period: _____

Date of Receipt of Rules & Regulations: _____

I hereby attest that I have received, read, understand, and agree to be bound by the Winfield Arms Condominiums Rules and Regulations.

Tenant or Guest Name: _____

Signature: _____

Date: _____

2. Tenant or Guest Name:

(First, Last) _____

Unit Number: _____

Occupancy Period: _____

Date of Receipt of Rules & Regulations: _____

I hereby attest that I have received, read, understand, and agree to be bound by the Winfield Arms Condominiums Rules and Regulations.

Tenant or Guest Name: _____

Signature: _____

Date: _____