

# The Landing Condominium Association

## OWNER INFORMATION FORM

Return to: CMI 2105 SE 9<sup>th</sup> Avenue Portland, OR 97214 Attn: Nancy La Voie  
Phone – (503)-233-0300 Fax – (503)-233-8884 NancyL@communitymgt.com

### OWNER INFORMATION

Unit # \_\_\_\_\_ Owner Occupied?  Yes  No Include in a Resident Directory?  Yes  No  
Owner name(s): \_\_\_\_\_  
Other occupants: \_\_\_\_\_  
Mailing address: \_\_\_\_\_  
Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_  
Cell: \_\_\_\_\_ Alternate cell: \_\_\_\_\_  
Email: \_\_\_\_\_ Alternate email: \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION (Other than occupant)

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
Email: \_\_\_\_\_ Does contact have key? :  Yes  No

### TENANT INFORMATION (IF RENTED)

Note: Owners are responsible for insuring that their tenants have copies of all governing documents of Chown Pella.

List name(s) of all occupants: \_\_\_\_\_  
Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_  
Cell: \_\_\_\_\_ Email: \_\_\_\_\_  
Rental company contact information (if applicable): \_\_\_\_\_

### VEHICLE REGISTRATION

[Attach additional sheets if necessary]

Vehicle #1 Vehicle #2  
Year: \_\_\_\_\_ Make/Model: \_\_\_\_\_ Year: \_\_\_\_\_ Make/Model: \_\_\_\_\_  
License Plate: \_\_\_\_\_ State: \_\_\_\_\_ Color(s): \_\_\_\_\_ License Plate: \_\_\_\_\_ State: \_\_\_\_\_ Color(s): \_\_\_\_\_

### PET INFORMATION

[Attach additional sheets if necessary]

Pet #1: Dog  Cat  Other  Pet #2: Dog  Cat  Other   
Breed: \_\_\_\_\_ Color: \_\_\_\_\_ Breed: \_\_\_\_\_ Color: \_\_\_\_\_  
Name: \_\_\_\_\_ License #: \_\_\_\_\_ Name: \_\_\_\_\_ License #: \_\_\_\_\_