Owner/Tenant Registration Form

OWNER INFORMATION:

OWNER NAME(S) _____

UNIT ADDRESS _____

MAILING ADDRESS _____

EMAIL ADDRESS _____

HOME/CELL PHONE _____ WORK PHONE _____

☐ Owner authorizes AMS to update mailing address to the above mailing address. If this box is not checked, the mailing address on file will remain the same.

TENANT INFORMATION: If Unit is Rented the Tenant Information must be completed

TENANT NAME(S) _____

HOME/CELL PHONE _____ WORK PHONE _____

EMAIL ADDRESS _____

LEASE START DATE _____ LEASE END DATE _____

PROPERTY MANAGEMENT FIRM (If applicable): _____

PHONE: _____ EMAIL: _____

☐ Owner authorizes AMS to discuss matters relating to the rental of this property with the above noted Rental Management Firm.

☐ Owner authorizes AMS to update mailing address to the above mailing address. By checking this box, **ALL** communication with regards to this property will be addressed through the property management company including routine notices, votes, maintenance, violations, and collections.

VEHICLE INFORMATION:

YEAR, MAKE & MODEL	STATE & LICENSE PLATE NO.	COLOR OF VEHICLE
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AGREED: *The Residents of this property have been advised that they are living in a Homeowners and/or Condominium Association and have been provided with copies of the Declarations, Bylaws and House Rules. Signature on this form verifies that Tenant agrees to abide by above documents.*

_____ _____

Owner Signature *Tenant Signature*

_____ _____

Date *Date*

TMG The Management Group
PROPERTY MANAGEMENT SALES | LEASING

AMS Association Management Services NW
CONDOMINIUMS HOMEOWNER ASSOCIATIONS DEVELOPER SERVICES
A Division of TMG