## BEAVER CREEK INFORMATION FORM

## (Please Print All Information)

		UNIT #:						
Owner 1: Owner 2:	Telephone #1 (C): Telephone #2 (C):							
Mailing Address:								
ursuant to 27A V.S.A ddress(es) as an acce								
urther notice.		Yes	No					
E-mail Address (F E-mail Address (S	Primary): Secondary):							
Emergency Contact:			Telephone # (C): Telephone # (H):					
s there insurance cove	rage for the dw	elling/interi	or of the Unit?	Ye	s	No		
Company:		Agent's Name:						
Phone #:			Policy #					
/ehicle(s) Registered to	Owner:							
Make	Model		Color	Plate	State	Year		
Are there any pets reside  ** Cats and Dogs in Soutl	ling within unit	?		Ye	 s	No		
_icense #:	Name::		Breed:		Cat	Dog		
_icense #:	Name::		Breed:		Cat	Dog		
ignature (s) of Owner(s):				Date:				
				Date:				

## **RENTAL INFORMATION**

Is your Unit Lease	ed?	Yes	No					
If Yes: Lease Te	rm:		Expiration					
PLEASE PRO	OVIDE A COPY OF YOU	JR LEASE	TO APPLETREE	BAY PROPE	RTY MANA	<u>SEMENT</u>		
Occupant (s)								
	ddress:							
	State							
Tenant 1Telephone # (H)			Tenant 2 Telep	ohone # (H) _				
Tenant 1 Telephone # (C)			Tenant 2 Telep	ohone # (C) _				
Tenant 1 Telephone # (W)			Tenant 2 Telephone # (W)					
Tenant 1 Email: _		Tenant 2 Emai	il:					
Does your unit ha	ve a Rental Manager?	Yes	No					
If Yes: Manager I	Name:							
Manager F	Phone:							
Manager E	Email:							
Has a copy of the	Associations' Bylaws be	een supplie	ed to your tenant(s	3)	Yes	No		
Does your lease r	equire your tenant(s) rea	ad and abi	de by the Associat	tions' Rules?	Yes	No		
•	have renter's insurance′ e email Appletree Bay Pr		inagement the dec	clarations pag	Yes e to their pol	No <u>icy</u>		
Company:			Agent's Name:					
Phone #:								
TENANT'S VEHIC	CLE INFORMATION							
Make	Model		Color	Plate	State	Year		
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