

***Village at Greenwood Condominium Association***

**2017 Homeowner/Resident Registration Form**

*Please return this form filled out completely, as it is imperative that the community records are accurate per Ohio Revised Code of Condominium Law, Section 5311.09, Unit Owners Association Records.*

*We appreciate your help in updating and maintaining these records.*

**Owner(s)**

(1): \_\_\_\_\_

(2): \_\_\_\_\_

Other Occupants: \_\_\_\_\_

Property Address: \_\_\_\_\_

Mailing Address: (If different): \_\_\_\_\_

**If you have Tenants, Complete Back of Form**

Pets (# & type): \_\_\_\_\_

**Phone Numbers**

Home: \_\_\_\_\_

Work: (1) \_\_\_\_\_ Work: (2) \_\_\_\_\_

Cell: (1) \_\_\_\_\_ Cell: (2) \_\_\_\_\_

Email: (1) \_\_\_\_\_ Email: (2) \_\_\_\_\_

**Vehicle Information of Occupants**



Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_ Year: \_\_\_\_\_ License #: \_\_\_\_\_

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_ Year: \_\_\_\_\_ License #: \_\_\_\_\_

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_ Year: \_\_\_\_\_ License #: \_\_\_\_\_

**POINT OF CONTACT IN THE EVENT OF AN EMERGENCY:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Does this Person have a Key to Unit/Home? Yes or No



**Tenant Information**

**OCCUPANT INFORMATION:** *If you do not currently occupy your unit or if it is leased, please provide the following information for the person(s) actually occupying your unit.*

Name of Occupant (s): \_\_\_\_\_  
\_\_\_\_\_

Pets (# & type): \_\_\_\_\_

Phone Numbers – Home: \_\_\_\_\_ Alternate: \_\_\_\_\_

***Please complete and return this form to:***

Reserve Realty Management

480 W. Aurora Rd.

Sagamore Hills, OH 44067,

Fax: 330-467-6845 or scan and Email to [office@reservemgmt.com](mailto:office@reservemgmt.com)

