

Villas of Stonebridge Crossing Homeowners 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 Planned Community Law, Section 5312.06, Power of Owner's Association, eff. 9/10/2010. 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

Phone Numbers

Home: _____

Work: (1) _____ Work: (2) _____

Cell: (1) _____ Cell: (2) _____

Email: (1) _____ Email: (2) _____



If you prefer to go paperless...

Please use this email address: _____

Signature: _____ **Date:** _____



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): _____

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

