

(Name of Association)

INFORMATION FORM

(Please Print All Information)

UNIT #: _____

Owner(s): _____

Telephone # (H): _____

Mailing Address: _____

Telephone # (W): _____

Telephone # (W): _____

Telephone # (C): _____

Telephone # (C): _____

E-mail Address (Primary): _____

E-mail Address (Secondary): _____

Pursuant to 27A V.S.A § 3-121(a), I/We being all of the unit owner(s) designate the above email address(es) as an acceptable method of providing notice from the Association to the above unit until further notice.

Yes No

Emergency Contact: _____

Telephone # (H): _____

Telephone # (W): _____

Telephone # (C): _____

Is there insurance coverage for the dwelling/interior of the Unit?

Yes No

Company: _____

Agent's Name: _____

Phone #: _____

Policy # _____

Fueled Heating Appliances:

Hot Water Heater: Brand & Model #: _____

Inspection Date: _____

Fireplace: Brand & Model #: _____

Inspection Date: _____

Vehicle(s) Registered to Owner/Occupant:

Make and Model

1. _____

Plate #: _____

State: _____

2. _____

Plate #: _____

State: _____

Are there any pets residing within unit?

Yes No

License #: _____

Brief Description: _____

SEE REVERSE SIDE →

Unit Leased: Yes No Lease Term: _____ Expiration Date: _____

Does your unit hold a Certificate of Occupancy (City of Burlington only)? Yes No

Occupant(s): _____
Mailing Address: _____

Telephone # (H): _____
Telephone # (W): _____
Telephone # (W): _____
Telephone # (C): _____
Telephone # (C): _____

Does your Unit have a Rental Manager? Yes No

Manager's Name: _____
Phone #: _____

Has a copy of the Associations' Rules been supplied to your tenant(s)? Yes No

Does your lease require your tenant(s) read and abide by the Associations' Rules? Yes No

Does your tenant have renters insurance? Yes No

Company: _____
Phone #: _____

Agent's Name: _____
Policy #: _____

Signature(s) of Owner(s): _____

Date: _____

Date: _____