

**The Courtyards of West Hollywood
Owner / Resident Questionnaire**

Unit #: _____

Owner/s of Record:

Date of Purchase: _____
Purchase Price: _____

Residential Address:

Billing Address:

Phone Numbers:
Home: _____
Work: _____
Cell: _____
E-mail: _____

Emergency Contact:
Name: _____
Phone: _____
Relationship: _____

Residents:
(Please specify relations: Owner, spouse, parent, child, sibling, roommate, tenant, or guest)

Name: _____	Name: _____
Home Phone: _____	Home Phone: _____
Work Phone: _____	Work Phone: _____
Relationship: _____	Relationship: _____

Vehicles in Garage:

Year: _____	Year: _____
Make: _____	Make: _____
Model: _____	Model: _____
Color: _____	Color: _____
License: _____	License: _____
State: _____	State: _____

Pets: (Only 1 dog or 2 cats)

Name: _____	Name: _____
Type: _____	Type: _____
Breed: _____	Breed: _____
Color: _____	Color: _____
Sex: _____	Sex: _____
ID #: _____	ID #: _____

I hereby acknowledge that I have received, read and understand the Rules and Regulations and will adhere to all policies accordingly. **Name:** _____ **Date:** _____

Comments: _____
