

PARKWAY VILLAS OWNER INFORMATION SHEET

Please complete this information annually and place in the Board mailbox or send via e-mail to secretary@parkwayvillas.org. Thank you!

Address: _____

Owner/co-owner: _____

Phone #(s): _____

Homeowner's insurance: (Provide the declaration page.) Exp. Date: _____

Current e-mail address (s): _____

Seasonal? Yes _____ No _____

Seasonal address: _____

City/State/Zip: _____

Phone number (if different than above): _____

Who checks your villa when away? _____

Phone #: _____

Does Association have key to your villa? Yes _____ No _____

Vehicle Information: Make & Model _____ License# _____ State _____

Emergency Contact Person:

Name: _____ Relationship: _____ Phone: _____

Alternate: _____ Relationship: _____ Phone: _____

Signature: _____ Date: _____