

CARRIAGE HILL CHAGRIN SECOND CONDOMINIUM OWNERS' ASSOCIATION



OWNER/TENANT INFORMATION FORM

The Ohio Condominium Laws, Statute 5311.09(A)(2), states, "Within thirty days after a unit owner obtains a condominium ownership interest," that this information be provided to the Association. Further, Statute 5311.09(A)(3) states, "Within thirty days after a change in any information that division (A)(2) of this section requires, a unit owner shall notify the association, through the board of directors, in writing of the change. When the board of directors requests, a unit owner shall verify or update the information."

OWNER'S NAME(S): _____

UNIT ADDRESS: _____

BILLING ADDRESS: _____
(IF DIFFERENT FROM UNIT ADDRESS)

HOME PHONE: _____ WORK: _____ CELL: _____

EMAIL ADDRESS: _____

OTHER OCCUPANT IN UNIT: _____ RELATIONSHIP: _____

OTHER OCCUPANT IN UNIT: _____ RELATIONSHIP: _____

The following information is required in order to effectively protect your property, possessions and that of all of our owners; although very important, this information is not required by statute:

PETS: 1) Dog _____ Cat _____ Type/Breed: _____ Color(s): _____

2) Dog _____ Cat _____ Type/Breed: _____ Color(s): _____

If none, please check here.

VEHICLES: 1) Color, Make & Model: _____ License Plate #: _____

2) Color, Make & Model: _____ License Plate #: _____

If none, please check here.

Please note the following parking rules:

- 1) Primary parking is on your parking pad in front of your garage or in the parking lot. During snowfall, please park any vehicle unable to be parked in the garage in the parking lot so the driveways can be plowed.
- 2) Parking of commercial vehicles on the property is prohibited. However, they may be parked inside the garage with garage door closed.
- 3) Parking on the street is prohibited.

EMERGENCY CONTACT NAME: _____ PHONE: _____

DOES THIS PERSON HAVE A KEY OR ACCESS TO YOUR UNIT? **YES** or **NO** (circle one)

WE WOULD ONLY CONTACT THIS PERSON IN EVENT OF A TRUE EMERGENCY, FIRE, LEAK ETC...

CARRIAGE HILL CHAGRIN SECOND CONDOMINIUM OWNERS' ASSOCIATION

c/o



TENANT INFORMATION (IF APPLICABLE)

TENANT'S NAME(S): _____

OCCUPANCY DATE: _____ LEASE EXPIRATION DATE: _____

HOME PHONE: _____ WORK PHONE: _____ CELL PHONE: _____

OTHER OCCUPANT'S NAME: _____ RELATIONSHIP: _____

OTHER OCCUPANT'S NAME: _____ RELATIONSHIP: _____

OTHER OCCUPANT'S NAME: _____ RELATIONSHIP: _____

PETS: 1) Dog _____ Cat _____ Type/Breed: _____ Color(s): _____

2) Dog _____ Cat _____ Type/Breed: _____ Color(s): _____

If none, please check here.

VEHICLES: 1) Color, Make & Model: _____ License Plate #: _____

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This form is to be completed in its entirety in order to prevent the Association from re-requesting the information. Providing partial or no information within the required 30 days of receipt may result in the Board taking action to elicit compliance of the request for information. Thank you in advance for your timely response.