

THE LAKES AF FRANKLIN MILLS CONDOMINIUM OWNERS ASSOCIATION, INC.

(The Condominium Association)

C/O



OWNER/OCCUPANT(S) INFORMATION

The Ohio State Condominium Laws, Statute 5311.09(A)(2) states that, "Within thirty days after a unit owner obtains a condominium ownership interest" that this information be provided to the Association, and 5311.09(A)(3) states that, "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: _____ Email: _____

UNIT ADDRESS: _____

BILLING ADDRESS: _____

IF DIFFERENT THAN UNIT ADDRESS

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

OTHER OCCUPANT IN UNIT: _____ RELATIONSHIP: _____

OTHER OCCUPANT IN UNIT: _____ RELATIONSHIP: _____

OTHER OCCUPANT IN UNIT: _____ RELATIONSHIP: _____

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

PET(S) 1) Dog: ____ Cat: ____ Type (Breed): _____ Color(s): _____

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

If none check here

VEHICLE(S) 1) Make, Model, & Color _____ License # _____

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

3) Make, Model, & Color _____ License # _____

If none check here

EMERGENCY CONTACT NAME: _____ PHONE: _____

Must be able to provide access to your unit for Emergency entry

Please note that this form is to be completed in its entirety 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 any and all action within their means to elicit compliance of the request for information. Thank you in advance for your timely response.