

**LIMETREE CONDOMINIUM ASSOCIATION, INC.**

**PROPERTY ADDRESS:** \_\_\_\_\_ **UNIT #** \_\_\_\_\_

PLEASE PROVIDE THE FOLLOWING INFORMATION SO YOU MAY BE REACHED IMMEDIATELY IN THE EVENT OF AN EMERGENCY. INFORMATION PROVIDED IS FOR THE EXCLUSIVE USE OF THE ASSOCIATION FOR MANAGEMENT PURPOSES ONLY.

OWNER'S NAME \_\_\_\_\_ OWNER'S NAME \_\_\_\_\_

OWNER'S EMAIL \_\_\_\_\_ OWNER'S EMAIL \_\_\_\_\_

TELEPHONE # \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

MAILING ADDRESS IF NOT FULLTIME RESIDENT \_\_\_\_\_

RESIDENCY STATUS: FULL TIME\_\_ SEASONAL\_\_ OTHER\_\_

OCCUPANT OR RENTER NAME \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

LEASE START DATE \_\_\_\_\_ LEASE END DATE \_\_\_\_\_

**\*\* IT IS THE OWNER(S) RESPONSIBILITY TO MAINTAIN A CURRENT MAILING ADDRESS, EMAIL & PHONE # ON FILE IN THE LIMETREE MANAGEMENT OFFICE.**

**EMERGENCY CONTACT/KEYHOLDER IN THE EVENT YOU ARE AWAY**

NAME \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_

NAME \_\_\_\_\_ TELEPHONE# \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_

**EMAIL AUTHORIZATION:**

IN SIGNING THIS DOCUMENT YOU HAVE GIVEN LIMETREE CONDOMINIUM ASSOCIATION, THE MANAGEMENT COMPANY REPRESENTING THE ASSOCIATION AND THE BOARD MEMBERS CONSENT TO SEND YOU ELECTRONIC COMMUNICATIONS. YOUR EMAIL ADDRESS WILL NOT BE SHARED WITH ANY ONE OTHER THAN THOSE DESCRIBED ABOVE.

OWNER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

OWNER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PLEASE EMAIL THIS FORM TO: [office@limetreecondo.org](mailto:office@limetreecondo.org)