

WESTLAKE VILLAS COMMUNITY ASSOCIATION

Owner Occupied Home Resident Information Form

Use this form if you are *not* renting out your unit

Updated October 2018

Owner:	Co-Owner:
UNIT:	Home Phone:
Billing Address:	Cell Phone:
Email:	Key Fob

Additional Members of the Household

Name:	Relationship:
Name:	Relationship:
Name:	Relationship:

*The Association CC&R's restrict parking within the association to 2 vehicles per Unit. Please keep in mind, additional vehicles may not be parked within the association. Providing this vehicle information to management does not "safe-list" your vehicle from being towed if no permit is displayed.

Vehicles

Year:	Make:	Model:	Color:	License #:
Year:	Make:	Model:	Color:	License #:

Emergency Contact Information

Name:	Phone:	Keys: <input type="checkbox"/> Yes <input type="checkbox"/> No
Name:	Phone:	Keys: <input type="checkbox"/> Yes <input type="checkbox"/> No

Owner Signature:	Date:
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Office Use Only Parking Permit#:

Please return form to:

FirstService Residential
4800 Westlake Parkway, Clubhouse Office
Sacramento, CA 95835

Phone 916-928-9900 ** Fax 916-928-9937 ** danielle.mckinney@fsresidential.com