

575 VALLEY STREET

Condominium Association

Please keep you Association informed of future changes. Complete this form and submit to, 575 Valley Street Condominium Assoc., P.O. Box 25696, Colorado Springs, CO 80936 or (719) 265-6481 (fax). If any change is made, please inform management so they can update the Association Records. Thank you!

*****INFORMATION IS CONFIDENTIAL AND WILL NOT BE SHARED*****

PREFERRED MEANS OF CONTACT (please check one):

EMAIL

MAIL

UNIT ADDRESS: _____

NAME OF RECORDED OWNER(S): _____

MAILING ADDRESS (IF DIFFERENT THAN ABOVE): _____

OWNER'S PHONE # _____ (HOME) _____ (WORK/CELL)

EMAIL ADDRESS _____

IF UNIT IS RENTED, PLEASE PROVIDE THE FOLLOWING ALONG WITH A COPY OF THE LEASE:

NAME OF TENANT(S): _____

TENANT'S PHONE # _____ (HOME) _____ (WORK/CELL)

EMAIL ADDRESS _____

EMERGENCY ACCESS: (FIRE, WATER, LEAKS, ETC.) IN CASE OF EMERGENCY, PLEASE CONTACT:

NAME: _____ PHONE: _____

DOES THIS PERSON HAVE A KEY: _____

OTHER COMMENTS: _____

OWNER'S SIGNATURE: _____ DATE: _____