

ISLAND VILLAGE CONDOMINIUM ASSN, INC.

OWNER PROFILE

Your cooperation in completing this profile thoroughly and promptly will be greatly appreciated. Please return the completed profile to management as soon as possible. **Complete form and scan and email to Jackiehamgmt@gmail.com** Per Florida Statutes, we are not allowed to supply owners with phone numbers and/or email addresses, so if you wish your phone number or e-mail to be listed in the directory, please check the box below #6.

1. NAME (S) of OWNERS: _____

UNIT # _____ Parking Space # _____

Address for Receiving Mail: _____

City: _____ State: _____ Zip: _____

Telephone Numbers: **Condo** () _____ **Other Residence or cell#:** () _____
Work #: _____ **Company Name:** _____

6. E-Mail Address: _____

Please check one of the following:

Full Time Resident _____ **Rental Only** _____
Part Time Resident _____ **Both Residential & Rental:** _____

7. Emergency Contact: _____ Phone: _____ Relation: _____

8. Rental Information: **Handled by Owner?** YES _____ NO _____

9. **IF NO**, please provide name & phone number of agent or person handling rental:

Name: _____ **Phone:** _____

Please ensure that a "Renter's Profile" sheet (available from management) is filled out and sent to PPM BEFORE your tenant moves in. It is also the owners' responsibility to ensure that the tenant has read and understands all Rules and Regulations.

10. PETS: Up to 2 (cats, small birds or fish-all indoor animals only) **NO DOGS**

Type: _____ **Name:** _____ **Weight:** _____
Type: _____ **Name:** _____ **Weight:** _____

11. VEHICLE REGISTRATION: (all vehicles must have a current registration)

Year	Make	Model	Color	Tag#	State
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

12. FAMILY MEMBERS **who may stay with you or in your unit while you are away:**

Last Name: _____ **First Name (s):** _____ **Relationship:** _____ **Other Info:** _____

Date form filled out: _____