

**PINE RIDGE VILLAGE CONDOMINIUM ASSOCIATION**

**OWNER/TENANT REGISTRATION FORM**

Unit Owner(s): \_\_\_\_\_

Unit Owner(s) Address: \_\_\_\_\_

Owner Home Phone: \_\_\_\_\_ Owner Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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(If you are leasing your unit, please complete & provide a signed copy of the lease & addendum)

**Tenant(s) Name:** \_\_\_\_\_

**Unit Address:** \_\_\_\_\_

**Lease Begin Date:** \_\_\_\_\_ **Lease End Date:** \_\_\_\_\_

**Tenant Home Phone:** \_\_\_\_\_ **Tenant Cell Phone:** \_\_\_\_\_

**Tenant E-mail:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

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**Vehicle Information:**

Vehicle #1: Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

License Plate #: \_\_\_\_\_ Color: \_\_\_\_\_

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Emergency Contact (should not be someone living in unit): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Please note number of residents in unit for police or fire emergencies: #adults: \_\_\_\_\_ #children: \_\_\_\_\_ #seniors: \_\_\_\_\_

Homeowner Insurance Co.: \_\_\_\_\_ Policy #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

**THIS INFORMATION IS ESSENTIAL & MUST BE PROVIDED**

**Complete & return to: Gervin Realty, 1280 Rt. 46, Parsippany, NJ 07054**