**OWNER / RESIDENT INFORMATION**

**Nautica Soundview Condominium Owners Association / Unit** # **Date**

**UNIT OWNER’S INFORMATION**

OFFICIAL MAILING ADDRESS

CITY

STATE

ZIP

OPTIONAL: Do you consent to receiving Association notices by email instead of mail? (check one) YES \_\_\_ NO \_\_\_

(You may stop email notices at any time by notifying Property Management. Email notices will stop if two notices are undeliverable.)

EMAIL YOU WANT TO USE FOR OFFICIAL NOTICES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OWNER 1 NAME**

HOME PHONE

CELL PHONE

WORK PHONE

PERSONAL EMAIL WORK EMAIL

VEHICLE LICENSE NO (if parking at Nautica) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ LICENSE STATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OWNER 2 NAME**

HOME PHONE

CELL PHONE

WORK PHONE

PERSONAL EMAIL WORK EMAIL

VEHICLE LICENSE NO (if parking at Nautica) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ LICENSE STATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OCCUPANCY INFORMATION (Used for certifying owner occupancy percentiles to mortgage lenders and appraisers.)  
 1. Is the Unit currently vacant? (Check one) YES \_\_\_ NO \_\_\_ If yes, how long will it be vacant? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. Do you rent the Unit? (Check one) YES \_\_\_ NO \_\_\_** If yes, complete the tenant information section below.

**3. Is the unit occupied by family members? (Check one) YES \_\_\_ NO \_\_\_\_** If yes, provide their names below.

**4. Is the Unit primarily used as a Second Home? (Check one) YES \_\_\_ NO \_\_\_**

FAMILY MEMBER OCCUPANTS (Living in the Unit who are not Owners such as Siblings, Children, Elderly Parents, etc.)

NAME RELATIONSHIP

NAME RELATIONSHIP

EMERGENCY CONTACT (Person not living in the Unit)

NAME

PHONE

EMAIL

RELATIONSHIP

# OWNER PETS (Nautica Soundview House Rules limit pets to two that weigh 25 pounds or less.)

TYPE OF ANIMAL

NAME

BREED

SIZE (LBS)

TYPE OF ANIMAL

NAME

BREED

SIZE (LBS)

HOT WATER TANK INFORMATION (Nautica Soundview requires owners replace water tanks at least every 10 years.)

MANUFACTURER SERIAL NUMBER

INSTALLATION DATE LENGTH OF WARRANTY

TENANT INFORMATION (Nautica Soundview requires lease agreements be provided to Property Management prior to tenant move-in. )

**TENANT 1 NAME**

HOME PHONE

CELL PHONE

WORK PHONE

PERSONAL EMAIL WORK EMAIL

VEHICLE LICENSE NO. (if parking at Nautica) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ LICENSE STATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TENANT 2 NAME**

HOME PHONE

CELL PHONE

WORK PHONE

PERSONAL EMAIL WORK EMAIL

VEHICLE LICENSE NO. (if parking at Nautica) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ LICENSE STATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# RULES AND REGULATIONS

# As the Owner the Unit, I verify that I have given the Tenant(s) a current copy of the Association’s Rules and Regulations.

OWNER NAME

SIGNATURE \_ DATE

# As the Tenant(s) residing in the Unit, I verify that I / we have received a copy of the Association’s Rules and Regulations.

TENANT NAME

SIGNATURE

DATE

TENANT NAME

SIGNATURE

DATE

# TENANT FAMILY MEMBERS (Living in the Unit that are not on the Lease – Minor children)

NAME RELATIONSHIP

NAME RELATIONSHIP

# TENANT PETS (Nautica Soundview House Rules limit pets to two that weigh 25 pounds or less.)

TYPE OF ANIMAL

NAME

BREED

SIZE (LBS)

TYPE OF ANIMAL

NAME

BREED

SIZE (LBS)

Direct questions to Nautica Soundview Community Manager Tom Gish, Jr. at 425-339-1160, ext. 223

Mail completed form to Port Gardner Property Management PO Box 1007 Everett, WA 98206

Or email form to: gaby@portgardnermgmt.com