

**THE GARDENS**

OWNER / TENANT INFORMATION FORM: UNIT # \_\_\_\_\_

85 / 95 BRONSON

**1. OWNER**

NAME _____ FIRST THEN LAST NAME, INCLUDE TITLE (Mr. Mrs. Ms)
NAME _____ FIRST THEN LAST NAME, INCLUDE TITLE (Mr. Mrs. Ms)
OCCUPANT NAME (Include Minors) _____ FIRST THEN LAST NAME, INCLUDE TITLE (Mr. Mrs. Ms)
OCCUPANT NAME (Include Minors) _____ FIRST THEN LAST NAME, INCLUDE TITLE (Mr. Mrs. Ms)
TEL.: HOME _____ WORK _____ CELL _____
EMAIL: _____
PARKING SPACE # _____ VEHICLE MAKE/MODEL _____
LICENSE PLATE # _____
PARKING SPACE # _____ VEHICLE MAKE/MODEL _____
LICENSE PLATE # _____
LOCKER # _____

**2. TENANT**

NAME: _____ FIRST THEN LAST NAME, INCLUDE TITLE (Mr. Mrs. Ms)
NAME: _____ FIRST THEN LAST NAME, INCLUDE TITLE (Mr. Mrs. Ms)
OCCUPANT NAME (Include Minors) _____ FIRST THEN LAST NAME, INCLUDE TITLE (Mr. Mrs. Ms)
OCCUPANT NAME (Include Minors) _____ FIRST THEN LAST NAME, INCLUDE TITLE (Mr. Mrs. Ms)
TEL.: HOME _____ WORK _____ CELL _____
EMAIL: _____
PARKING SPACE # _____ VEHICLE MAKE/MODEL _____
LICENSE PLATE # _____
PARKING SPACE # _____ VEHICLE MAKE/MODEL _____
LICENSE PLATE # _____
LOCKER # _____
OWNER'S ADDRESS: _____
TEL.: HOME _____ WORK _____
OWNER'S EMAIL: _____

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_