## **Legacy at Baker Condominium Association**

Property Manager: The Select Group 2224 Virginia Beach Boulevard #201 Virginia Beach, VA 23454 757-486-6000

## **Condominium Owner Information Form**

Thank you in advance for completing this form. Federal, state and local regulations require the information contained herein be on file with the condominium association.

Directions: Put your cursor on the first "Click here to enter text." Type in your text then tab to the next entry.

Property Address:		, Virginia Beach, VA 23462
Owner #1:	Email:	
Phone: (H) (W) (M)		
Mailing address If different from property address:		
Owner #1:		
Phone: (H) (W) (M)		
Mortgage Company:		
Address		
Condo Insurance Company:		
Address:		
	NO	
If yes, name of lessee/s		
Lease start date	End date _	
The lessee/s has/have been made aware of al Baker Condominium Association. YES	l restrictions an	nd rules of Legacy at
A copy of the lease must be sent to Legacy at Group, 2224 Virginia Beach Blvd., #201, Virgin		
Vehicle/s you own that are housed at this address:		
Vehicle #1		
Owner/s		
Make	Model	

	Number				State		
Vehicle #2							
Owne	r/s						
Make				Model			
Plate l	Number				State		
Vehicle #3							
Owne	r/s						
Make				Model			
Plate I	Number				State		
Color							
	YES How many	<b>NO</b>	-				
u have a pet?	YES  How many Breed/s	NO /?					
u have a pet?	YES  How many Breed/s Weight of Are these	NO /?each dog dogs all up-	-	vaccines?	YES	NO YES	NO
u have a pet?	How many Breed/s Weight of Are these Do these of How many Breed/s	NO  each dog dogs all up- dogs all have	- -to-date on their e a current Virg	vaccines? inia Beach	YES pet license?	NO YES	NO
u have a pet? Dog	How many Breed/s _ Weight of Are these Do these of How many Breed/s _ Weight of	NO  each dog _ dogs all up- dogs all have  ?  each cat _	 -to-date on their re a current Virg	vaccines? inia Beach	YES pet license?	NO YES	NO
u have a pet? Dog	YES  How many Breed/s Weight of Are these Do these of How many Breed/s Weight of Are these	NO  each dog _ dogs all up- dogs all have each cat _ cats all up-t	- -to-date on their e a current Virg	vaccines? inia Beach vaccines?	YES pet license?	NO YES	NO

When you have completed the form save it as: "Legacy.[your last name]". Example: Legacy.Smith. Email the completed form to Iris Torres at <a href="itorres@theselectgroup.us">itorres@theselectgroup.us</a>.