

Birdneck North Condominium Association, Inc.

c/o The Select Group, 2224 Virginia Beach Blvd., Suite 201, Virginia Beach, VA 23454
(757) 486-6000 fax: (757) 486-6988 Email: select@theselectgroup.us Website: www.theselectgroup.us

Resident Information Form

Owner Name: _____

Unit Address: _____

Alternate Address (if applicable): _____

City: _____ State: _____
Zip: _____

If using an alternate address, is this still a residence that you reside in either full or part time? _____

If no, then who is residing in the unit? _____

Phone: (h) _____ (w) _____ (c) _____

Email address: _____

Emergency Contact: _____ Relationship: _____

Phone: (h) _____ (w) _____ (c) _____

Is this person a relative? _____ If so what relation are they to you? _____

Tenant Information

(If you are leasing your unit)

Resident Name(s): _____

Phone: _____ (w) _____ (c) _____
(h) _____

Email address: _____

(Please be sure to forward a copy of the lease to The Select Group, Inc.)

If you retain the services of a leasing agent, please list the name, address and phone number of the agent:

***The information on this form is for office use only and will be held in strictest confidence.
Return completed form to the address or fax number provided above, or by email to the
management team listed on our website.**