

Condominium Association, Inc.

## **TENANT INFORMATION FORM**

Tenant Name:			
Address:			
Home:	Work:	_Cell:	
Email Address:			
Names of all Persons Residing in the Unit:			
Lease Start Date:	Lease End Date:		
Emergency Contact Information			
Emergency Contact:		_ Relationship:	
Home:	Work:	_ Cell:	
<b>Owner/Agent Information</b>			
Owner/Agent Name:			
Address:			
Home:	Work:	_ Cell:	
Email Address:			
*The information on this form is for office use only and will be held in strictest confidence.			

## Please return completed form to The Select Group at the address or fax number provided below or email to <u>jstrickland@theselectgroup.us</u>

c/o The Select Group, Inc., 2224 Virginia Beach Blvd., Suite 201, Virginia Beach, VA 23454 (757) 486-6000 fax: (757) 486-6988 email: <u>bgarrett@theselectgroup.us</u> website: <u>www.theselectgroup.us</u>