

# SHADOWLAWN VILLAS II

## TENANT INFORMATION FORM

Tenant name: \_\_\_\_\_

Address: \_\_\_\_\_

Lease Start Date: \_\_\_\_\_ Lease End Date: \_\_\_\_\_

Phone: (h)\_\_\_\_\_ (w)\_\_\_\_\_ (c)\_\_\_\_\_

Email: \_\_\_\_\_

Names of all persons residing in unit: \_\_\_\_\_

### Emergency Contact Information

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

### Owner/Agent Information

Owner/Agent name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (h)\_\_\_\_\_ (w)\_\_\_\_\_ (c)\_\_\_\_\_

Email: \_\_\_\_\_

**\*\*All information is for office use only and will be held in strictest confidence\*\***

**Return completed form to the address and fax number below or  
email to asmith@theselectgroup.us**

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