

at Aberdeen,

A Condominium Association, Inc.

TENANT INFORMATION FORM

Tenant Name:			
Address:			
Phone: (h)	_(w)	(c)	
Email Address:			
Names of all Persons Resid	ling in the Unit:		
Lease Start Date:		Lease End Date:	
	Emergency Cont	tact Information	
Emergency Contact:		Relationship:	
Phone: (h)	(w)	(c)	
	Owner/Agent	<u>Information</u>	
Owner/Agent Name:			
Address:			
Phone: (h)	(w)	(c)	
Email Address:			

*The information on this form is for Association use only and is held in strictest confidence.

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

c/o The Select Group, 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>