

at Aberdeen,

A Condominium Association, Inc.

OWNER INFORMATION FORM

Owner Name:		
Unit Address:		
Alternate Mailing Addres	s (if applicable):	
City:	State:	Zip:
Phone: (h)	(w)	(c)
Email Address:		
Emergency Contact:		
Phone: (h)	(w)	(c)
	<u>Tenant Inform</u> (If you are leasing y	
Resident Name(s):		
Phone: (h)	(w)	(c)
Current dates of lease (ex	July 9, 2012 through July	8, 2013)
If you retain the services phone number:	of a managing agent plea	se list the agent's name, address, and
The information in this	form is for office use only	v and will be held in strictest confidence.
Return completed	form to The Select Group at email to <u>afleetwood@the</u>	t the address or fax number below or eselectgroup.us

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>