



at Aberdeen,

A Condominium Association, Inc.

TENANT INFORMATION FORM

Tenant Name: _____

Address: _____

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

Email Address: _____

Names of all Persons Residing in the Unit: _____

Lease Start Date: _____ Lease End Date: _____

Emergency Contact Information

Emergency Contact: _____ Relationship: _____

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

Owner/Agent Information

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 afleetwood@theselectgroup.us**

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