

**Kingswood II Condominium Association, Inc.**

P. O. Box 274 □ Georgetown, CT 06829 □ (203) 938-3172

**Unit Owner Information Form**

The Association requires Unit Owner information that must be updated annually or when there is a change of information. Please complete all the sections *clearly* on this form and return it to the above address.

**Date:** \_\_\_\_\_

**Unit #:** \_\_\_\_\_

**Unit Owner:** Name(s): \_\_\_\_\_

Home/Night Phone #: (        )

Work/Day Phone #: (        )

Cell Phone #: (        )

**E-Mail Address:** \_\_\_\_\_

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

(If NOT at KW) City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Emergency:** In the event of an emergency, please notify:

Name: \_\_\_\_\_

Phone #: (        ) (Work/Day)

**Unit Occupancy:** List below person(s) living at this location and give relationship:

Name	Relationship	Adult/Child

**Motor Vehicle Registration:** List all vehicles parked at KW including License Plate #s.

License Plate # (State)	Make	Model	Year	Color

**Pet:** Only two pets per unit are permitted.

Name	Type/Breed	Color/Description	Dog License #