

(Name of Association)

Resident Information Sheet – Please complete and return to our office.

Property Address

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Homeowner Information

| | | |
|---|-------------------|------------------------|
| Homeowner Name(s) | | |
| Please list all other living in unit- Children, etc. (If unit is rented, please fill in occupant information section below) | | |
| Address (if different from above) | | City/State/Zip |
| Home Phone | Work Phone(s) | Place(s) of Employment |
| Cell Phone(s) | Email Address(es) | |

Occupant Information (if different from above)

| | | |
|---|-------------------|------------------------|
| Occupant Name(s) | | |
| Please list all other living in unit - Children, etc. | | |
| Home Phone | Work Phone(s) | Place(s) of Employment |
| Cell Phone(s) | Email Address(es) | |

Automobiles at Property

| Year | Make | Model | Color | License Plate |
|------|------|-------|-------|---------------|
| | | | | |
| | | | | |
| | | | | |

Emergency Contact

| | |
|------------------|------------------|
| Name(s) | Relationship |
| Phone Number (1) | Phone Number (2) |
| Name(s) | Relationship |
| Phone Number (1) | Phone Number (2) |

Please submit this form to:

Keller Property Management, llc
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Fax: 651-452-6633