

# Waterford Homeowners Association

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| Property Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Member Number |                     |       |
| <b>Resident Emergency Registration Form</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                     |       |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p><b>Please choose a reason for update:</b></p> <p><input type="checkbox"/> New Owner</p> <p><input type="checkbox"/> New Tenant (Move In/Out fee Included)</p> <p><input type="checkbox"/> Address Change</p> <p><input type="checkbox"/> Vehicle Change</p> <p><input type="checkbox"/> Annual Update-No Changes</p> </div> <div style="width: 48%;"> <p><b>Please specify resident status:</b></p> <p><input type="checkbox"/> Owner Occupied</p> <p><input type="checkbox"/> Tenant related to Homeowner<br/>Relationship: _____</p> <p><input type="checkbox"/> Tenant Occupied</p> <p><input type="checkbox"/> Unoccupied</p> </div> </div> |               |                     |       |
| <p>Please choose one address for all correspondence, including account statements, Association notices and monthly newsletters. Tenants must be provided copies of Newsletters and notices by the Homeowner or Agent.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |                     |       |
| <b>Homeowner</b> (Must match name on Grant Deed)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                     |       |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Email         |                     |       |
| Mailing Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                     |       |
| Phone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Cell          | Work                |       |
| <input type="checkbox"/> <b>Tenant</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |               |                     |       |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Lease begins  | Lease ends          |       |
| Email                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |                     |       |
| Phone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Cell          | Work                |       |
| <input type="checkbox"/> <b>Property Management Company</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                     |       |
| Company                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |               | Agent               |       |
| Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |               |                     |       |
| Phone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Cell          | Email               |       |
| <p>Tenants have received and reviewed copies of the following:</p> <p><input type="checkbox"/> <b>Bylaws</b>    <input type="checkbox"/> <b>CC&amp;R's</b>    <input type="checkbox"/> <b>Rules Handbook</b>    <input type="checkbox"/> <b>Parking Rules</b></p> <p><i>Please attach a copy of the lease agreement and criminal background check for all tenants.</i></p> <p><input type="checkbox"/> <b>Move In/Out Fee of \$200 payable to: Waterford HOA</b> (Required for any change of occupancy)</p>                                                                                                                                                                                                                               |               |                     |       |
| <b>Vehicle</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               |                     |       |
| <p>Please complete for ALL vehicles in your household including motorcycles.</p> <p><i>Any vehicle without current insurance or registration is subject to tow at the owner's expense.</i></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               |                     |       |
| Make                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Model         | License Plate       | Owner |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                     |       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                     |       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                     |       |
| <b>Resident</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                     |       |
| <p>In the event of an emergency, it is important that we have accurate information regarding the residents of the community. Please complete for all residents, including children, and pets living in the unit.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               |                     |       |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Relationship  | Phone number        |       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                     |       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                     |       |
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| <b>Pets</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                     |       |
| <input type="checkbox"/> Dog <input type="checkbox"/> Cat                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Breed         | Weight              | Name  |
| <input type="checkbox"/> Dog <input type="checkbox"/> Cat                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Breed         | Weight              | Name  |
| Date Completed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               | Homeowner Signature |       |

Please return to: Management Solutions, 6200 Buena Vista Dr., Newark CA 94560  
 (510) 659-8969      (510) 656-4495 fax      managementsolutionshoa@gmail.com