Homeowners Association for Cottonwood Estates, Inc. HOMEOWNERS QUESTIONNAIRE

OWNER/RESIDENT INFORMATION			
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Property Address:	Unit#	Owner □ Resid	ient 🗆
Full Name:			
Mailing Address:			
Home Phone	Business Phon	ie:	
Fax:	Mobile Phone:		
Pager:	Other:		
Email Address:			
	Drivers License	e #	State
CROUGE INFORMATION	Name o		
SPOUSE INFORMATION	Name:		
Business Phone:	Mobile Phone:		
Pager:	Fax:		
Email Address:			
	Drivers License	e #	State
Children/Other Resident Names	Date of Birth		Gender
VEHICLES			
		Model	Color
License rag	viance iv	loaci	00101
EMERGENCY CONTACT			
Full Name:	Relatio	onship:	
Home Phone:	Business Phone:		
nger: Mobile Phone:			
This information will be kept confidential. The purpose of the request is to maintain proper records, identify the residents entitled to use the facilities, and have emergency contact information.			
A Property owner shall notify the Association not later than the 30 th day after the owner has noticed of a change in any information required by Subsection (e), and shall provide the information on requested by the Association from time to time.			

Please fax this completed form to 281.457.5343
Mail to: JDH Association Management Co.

15201 East Freeway #205, Channelview TX 77530

Office: 281.457.5341