

Chelsea Heights Homeowners Association, Inc.  
HOMEOWNERS QUESTIONNAIRE

<b>OWNER/RESIDENT INFORMATION</b>				
Property Address:	Unit#	Owner <input type="checkbox"/> Resident <input type="checkbox"/>		
Full Name:				
Mailing Address:				
Home Phone	Business Phone:			
Fax:	Mobile Phone:			
Pager:	Other:			
Email Address:				
		Drivers License #	State	
<b>SPOUSE INFORMATION</b>		Name:		
Business Phone:		Mobile Phone:		
Pager:		Fax:		
Email Address:				
		Drivers License #	State	
Children/Other Resident Names	Date of Birth	Gender		
<b>VEHICLES</b>				
License Tag	Year	Make	Model	Color
<b>MORTGAGE INFORMATION</b>				
Name of Lien Holder:				
Address of Lien Holder:				
Loan Number:				
<b>EMERGENCY CONTACT</b>				
Full Name:		Relationship:		
Home Phone:		Business Phone:		
Pager:		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 <sup>th</sup> 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