

Villa Serena

OWNER UNIT INFORMATION QUESTIONNAIRE (CENSUS)

Unit Address _____

OWNER INFORMATION

Owner Name(s) _____

Owner Mailing Address _____

Email Address _____ Email Address _____

Home Phone# _____ Work Phone# _____

Home Phone# _____ Work Phone# _____

What phone number do you want in the front gate call box? _____

Names of all Individuals who reside in the Unit and their relation to Owner:

Name (Please Indicate if Adult or Child)	Relation to Owner

List the Make, Model, and License Plate Number of Owner's Vehicles:

Make	Model	Color	Year	Plate Number	State

Do you have a Pet? ____ Yes ____ No If yes, list the type of pet and breed:

Dog or Cat	Breed

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OWNER UNIT INFORMATION QUESTIONNAIRE (CENSUS) - Continued

Mailbox No. _____ Gate Code No. _____

Gate Opener Transponder No(s): _____; _____ (TR#s)

Pool and Club Access Card No(s): _____; _____

Are you a seasonal resident? ____ Yes ____ No

Emergency Contact Information

Name _____ Relationship _____

In case of emergency, how can the management company reach this person?

Name of someone who can provide emergency access to the unit if different from the person above

Name _____ Phone _____

Please Sign and Date below:

Owner Signature _____ Date _____

Co-Owner Signature (if applicable) _____ Date _____

Mail this completed form to:

Villa Serena Owners Association, Inc.
2239 Kings Palace Drive
Riverview, Florida 33578

or

You can drop the completed form in the metal drop box outside the Clubhouse doors.

or email it to

ckelly@ameritechmail.com