

Association Name

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

Animals at Property

Type	Breed	Weight	Registered with City

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
7300 147th Street West, Suite 305, Apple Valley, Minnesota 55124-4509
info@kellerpm.com, Fax: 952-432-7786