



199 E. Surfside Drive, Port Hueneme, Ca.

Phone 805-488-3304 Fax 805-986-4603

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**TENANT REGISTRATION**

Name of Condo Owner \_\_\_\_\_ Unit Number: \_\_\_\_\_

**TENANT INFORMATION BELOW:**

Name of ALL Tenants who will be living in unit (and cell phone #) \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Street

City/State/Zip

Pets (MAXIMUM of two pets/PIT BULLS AND ROTTWEILERS NOT PERMITTED):

Breed: \_\_\_\_\_ Name: \_\_\_\_\_ Pet License# (copy required): \_\_\_\_\_

Breed: \_\_\_\_\_ Name: \_\_\_\_\_ Pet License#(copy required): \_\_\_\_\_

Vehicle: Year/Make/Model Color License Plate State/Number/Expiration Date

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

By signing below, I am confirming that I have received a current copy of the Surfside I Rules & Regs and agree to abide by them at all times **(INCLUDING NO SATELLITE DISHES ALLOWED ON BALCONIES)**:

TENANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

TENANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

OWNER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

NEW DOOR KEY GIVEN TO OFFICE? DATE OFFICE RECEIVED: \_\_\_\_\_

NEW TENANT FEE ADDED TO LOAD SHEET – DATE: \_\_\_\_\_

**OFFICE USE ONLY**

Date Rec \_\_\_\_\_ Pedestrian Key # \_\_\_\_\_ Gate Card # \_\_\_\_\_

Remote # \_\_\_\_\_ Mailbox Post \_\_\_\_\_ Box \_\_\_\_\_ Parking space # \_\_\_\_\_ Parking stickers rec. \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_