

Westlake Highlands Community Association

c/o: Anchor Community Management, Inc.

P.O. Box 3237 ☛ Camarillo, CA 93011-3237 ☛ (805) 388-3848 ☛ FAX: (805) 388-0856

carol@anchorcommunitymgt.com ☛ anchorcommunitymgt.com/westlake.html

OWNER & TENANT REGISTRATION FORM

Westlake Highlands Address: _____ Hilltop Way, Thousand Oaks, CA Date: _____

Owner Name: _____ Cell Phone: _____ Email: _____

Owner Name: _____ Cell Phone: _____ Email: _____

Owner Name: _____ Cell Phone: _____ Email: _____

Home Phone: _____ Work Phone: _____

Mailing Address (if different): _____

Emergency Contact: Name: _____

Phone: _____

AS OWNER, I WILL (Please check one) Live In The Home Rent Out The Home

Use it as a Second/Vacation Home (no renter)

Name Of Tenant(s) (if applicable): _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

Renter newsletters are sent via email, please include email address.

Agent name/contact if applicable _____

ADULT RESIDENTS (Tenants, roommates, or anyone that lives with the owner or tenant of record)

Name: _____ Work Phone: _____

Cell Phone: _____ Email: _____

Name: _____ Work Phone: _____

Cell Phone: _____ Email: _____

Name: _____ Work Phone: _____

Cell Phone: _____ Email: _____

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RESIDENTS UNDER THE AGE OF EIGHTEEN

Name: _____ DOB: _____

Name: _____ DOB: _____

Name: _____ DOB: _____

Name: _____ DOB: _____

LIST ALL PETS RESIDING ON PROPERTY

Animal _____ Breed _____ Color _____ License _____

Animal _____ Breed _____ Color _____ License _____

Animal _____ Breed _____ Color _____ License _____

LIST VEHICLES TO BE PARKED WITHIN THE COMMUNITY

Registered Owner _____ Year _____ Make/Model _____ License # _____

Registered Owner _____ Year _____ Make/Model _____ License # _____

Registered Owner _____ Year _____ Make/Model _____ License # _____

Registered Owner _____ Year _____ Make/Model _____ License # _____

As homeowner, I have provided my tenants with a copy of the Rules and Regulations. I understand that according to the governing documents of the Association, I am responsible for the actions of my tenants as they relate to the Association.

I understand I am responsible for providing updated contact information to the Association if there are any changes in occupancy. All mailings and notifications will be sent to the most recent address on file, changes to mailing address or occupancy must be provide in writing.

Homeowner Signature: _____ Date: _____