White Oak Townhomes Owners 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/whiteoak.htm

OWNER & TENANT REGISTRATION FORM			
White Oak Address:	, Simi Valley Date:		
Name(s) of Owner(s):			
Mailing Address (if different):			
Home Phone:	Work Phone:		
Cell Phone:	Email:		
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, roomn	nates, or anyone that lives with the owner or tenant of record)		
Name:	Work Phone:		
Cell Phone:			
Name:	Work Phone:		
Cell Phone:	Email:		
Name:	Work Phone:		
Cell Phone:			

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RESIDENTS UNDER T	HE AGE OF EIGHT	EEN	
Name:		DC	DB:
LIST ALL PETS RESID	ING 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 #
that according to the go tenants as they relate to I understand I am respo are any changes in occu	overning documents the Association. Onsible for providing pancy. All mailings	of the Association, I am res	on to the Association if there ent to the most recent address
Homeowner Signature: _			Date: