## WHITE BEAR PERSERVE

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If you are an owner and live on-site, please fill out the top portion of this form, only. If you are an owner and live off-site, please fill out the top portion of this form, and complete the bottom portion with the occupant's information. This form will be kept confidential and is used by the management company and the Board of Directors for the association's records, insurance coverage, and for emergency reasons only.

Name(s) to be on Ac	ecount:		
Association Address	s:		
City:		State:	Zip Code:
Mailing Address: (If	different from above)		
City:		State:	Zip Code:
Home/Cell Phone #:		Home/Cell Phone #:	
Email Address(s): _			
*** Wou	uld you like to receive Asso	ociation mailings & update	es via email? YES 🗆 ***
Place(s) of Employment:		Work Phone No:	
Place(s) of Employment:		Work Phone No:	
Person(s) to contact	in case of an emergency:		
Phone #s:			
Winter Address:			
	(If applicable, please cont	act Keller when winter address begins and ends each year)	
	City:	State:	Zip Code:
Vehicles:			
Make	Model	Year	Plate #
Make	Model	Year	Plate #
Occupant Name(s):			
Home/Cell Phone #:		Home/Cell Phone #:	
Vehicles:			
Make	Model	Year	Plate #
Make	Model	Year	Plate #

Please be sure to include a copy of your lease agreement, if applicable.