

OWNER INFORMATION FORM

Please Return this Form to Southview Property Management Inc.

1. Strata Information	
Strata Plan No:	Strata Lot No:

2. Personal Information (Please Print)		
Name(s) (Must be registered at Land Titles Office): 1. _____ 2. _____ 3. _____		Unit Address:
Home Phone: ()	Other Phone: ()	Email*:
Did you Purchase the Unit from the Developer: <input type="checkbox"/> YES <input type="checkbox"/> NO	Are you Going to Live in the Unit: <input type="checkbox"/> YES <input type="checkbox"/> NO	
Are you Going to be Renting the Unit (Form K)**?: <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> FAMILY	Will the Unit be Empty (contact Southview if status changes): <input type="checkbox"/> YES <input type="checkbox"/> NO	
If the Unit is <u>Empty, Rented, or Owner NOT Living in Unit</u> , the Owner's Offsite Address:		

*By adding your email information you are agreeing to receive emailed strata specific information from your Strata Corporation

**Please Contact Southview for "Form K" if unit is rented

3. Resident Vehicle Information (Please Print)	
Locker No:	
Stall No:	Stall No:
Model:	Model:
Year:	Year:
Colour:	Colour:
Licence:	Licence:

4. Owner's Emergency Contact Person (not the OWNER, unless the unit is rented. Please Print):	
Name:	Phone: ()
Address:	

5. For Office Use Only		
Date Received:	Completed: <input type="checkbox"/> Excel <input type="checkbox"/> Labels	Signature: