

**Resident Information Data Sheet**  
(please print or type)

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

Primary Phone: \_\_\_\_\_

Lot Number: \_\_\_\_\_

Cell / Secondary Phone: \_\_\_\_\_

Assigned Code (**office use**): \_\_\_\_\_

Emergency Phone: \_\_\_\_\_

**OCCUPANTS LIVING AT THIS ADDRESS**

(please include EVERY person residing at this address)

Last Name	First Name	Status (owner, child, tenant, etc.)

**VEHICLE INFORMATION**

Make/ Model	Color	Tag	Decal / Barcode

**EMERGENCY CONTACT INFORMATION**

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

**RESIDENT INFORMATION (page 2):**

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

**PERMANENTLY AUTHORIZED GUESTS**

*This section refers to people you would authorize to visit you at any time or on a restrictive basis, WITHOUT HAVING TO CALL FOR APPROVAL (relatives, close friends, maid, etc.)*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

( ) Check here if authorized ALL days, and at ALL times. If restrictive, list days and times authorized.

Days / Times: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

( ) Check here if authorized ALL days, and at ALL times. If restrictive, list days and times authorized.

Days / Times: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

( ) Check here if authorized ALL days, and at ALL times. If restrictive, list days and times authorized.

Days / Times: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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Days / Times: \_\_\_\_\_

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Days / Times: \_\_\_\_\_

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Days / Times: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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Days / Times: \_\_\_\_\_