

GENERAL DATA AND RESIDENT FORM

Date: _____ Unit #: _____

Name(s) of Member(a): _____

CONTACT INFORMATION:

Home Telephone: _____ Listed / Unlisted (Please Circle One)

Cell Phone #1: _____ Work #1: _____

Cell Phone #2: _____ Work #2: _____

Email Address: _____

Emergency Contact Person: _____

Relationship: _____ Telephone: _____

INSURANCE & LIABILITY

Please give the photocopy of your Insurance to the Office.

The current Shareholders' Agreement states: The member agrees to carry personal insurance to protect against fire, theft or damage, including water damage, to property owned by the member. The member agrees to carry personal liability insurance. The member will not permit anything to be done or kept in their housing unit that could increase the risk of damage or disaster, the rate of Hunter Estates' insurance premiums, or could cause any type of insurance to be impossible to obtain or retain.

RESIDENT INFORMATION

Number of People Residing In Unit: # Adults _____ # Children (18 and under) _____

Please list ALL RESIDENTS living in your unit. PLEASE PROVIDE NAME AND AGE, IF UNDER 18:

The current Shareholder's Agreement states: The member(s) plus those persons listed on the membership application form have the exclusive right to occupy the assigned housing unit and parking. The member agrees to obtain written permission from Hunter Estates before providing housing or parking to any other person.

Please list below anyone the Co-op may allow into your unit, in the case of being locked out. This is for your protection as well as the Co-op's. Anyone not listed by you will not be let in or given a key, so be sure to include your children.

SIGNATURE (required): _____