

Crystal·Crossing

HOMEOWNER DATA SHEET

NAME(s): _____

ADDRESS: _____

CHILDRENS NAMES/AGES: _____

DO YOU HAVE PETS: _____

IF INVESTOR UNIT OR 2ND HOME, PLEASE COMPLETE THE FOLLOWING FOR HOA BILLING AND CORRESPONDENCE:

MAILING ADDRESS: _____

INTERESTED IN SERVING ON A COMMITTEE/BOARD: Yes or No (circle)

MEANS OF COMMUNICATION:

***EMAIL NOTIFICATION:* WE USE EMAIL TO EXTEND THE REACH AND TIMELINESS OF OUR COMMUNITY. IN OTHER WORDS, WE'LL USE EMAIL TO BRING IMPORTANT INFORMATION TO YOU.**

PHONE NO.: Home: _____; Other: _____

EMAIL ADDRESS: _____

OTHER COMMENTS: _____

THIS INFORMATION IS FOR HOA USE ONLY