

RIVER MOUNTAIN MOBILE ESTATES OWNERS ASSOCIATION Resident Information Form

Please complete this form in its entirety and return to the address or email noted below. Thank you!

You MUST provide copies of driver's license and/or ID cards to verify age for all owners/residents/occupants. This is a 55+ age community.

Owner Information

Owner Name(s): _____

Property Address: _____

Mailing Address: _____

Mailing City: _____ Mailing State: _____ Mailing Zip: _____

Phone Number(s): Home _____ Cell _____

Email: _____

Check here to receive community information by email instead of mail.

Unit is: Owner Occupied _____ Tenant Occupied _____

Resident Information (if different than above)

Resident Name(s): _____

Other Occupant(s): _____

Phone Number(s): Home _____ Cell _____

Email: _____

Current Lease MUST be submitted with this form

Pet Information

If this is a service animal, please include training certificate and doctor letter confirming the need for a service animal.

Breed & Weight: _____ Breed & Weight: _____