Shore Mariner Condominium Association

OWNER INFORMATION AND EMERGENCY NOTIFICATION FORM
Revised 2024

OWNER NAME(S)_____ Unit #_____

Home Phone_____ Cell Phone. _____

Cell Phone _____

Away Address_____
Street City State Zip

I. To receive Notifications and Board of Directors Meeting Minutes please include:

Owner E-Mail Address(es):_____ _____

II. IN CASE OF EMERGENCY, PLEASE NOTIFY:

(1)_____
Name Street City State Zip
_____
Home Phone Cell Phone Email Relationship

(2)_____
Name Street City State Zip
_____
Home Phone Cell Phone Email Relationship

(3)_____
Name Street City State Zip
_____
Home Phone Cell Phone Email Relationship

(4)_____
Name Street City State Zip
_____
Home Phone Cell Phone Email Relationship

III. CAR REGISTRATION: LICENSE_____MAKE_____MODEL_____

PARKING SPOT #_____

IV. KEYS: Management MUST have a unit key for emergencies. If you have or plan to install an electronic door lock you need to have one that includes a key. All keys will be in a locked box in the locked community closet.

V. I give permission for my phone numbers to be in the owner directory. Y N _____ initial

I give permission for my email address to be shared with other owners. Y N _____ initial

I give permission for my phone numbers to be in the owner directory. Y N _____ initial

I give permission for my email address to be shared with other owners. Y N _____ initial