

Signed:

OWNER / PROPERTY MANAGER REGISTRATION FORM

Complete this form within 10 days of making any changes to RETURN FORM TO SDHOA: sdhoa@sdhoa.com your contact information or title/ownership and/or tenancy. 5151 Murphy Canyon Rd #135 San Diego, CA 92123 NAME OF HOA: UNIT ADDRESS: NAME OF OWNER(S): OWNER(S) MAILING ADDRESS: (if different from above address) CELL PHONE:_ ALTERNATE PHONE: EMAIL ADDRESS(S): □ *OWNER OPT-IN* for EMAIL communication from □ *OWNER OPT-IN* for TEXT communication from SDHOA regarding all association business, SDHOA for EMERGENCY notices only, Ex: water shut communication, agendas & monthly statements. off notices, safety concerns, etc. **SDHOA DOES NOT MAIL PAPER STATEMENTS** ** If you do not opt-in for email notifications, you will receive notices via mail to the mailing address listed above with the exception of monthly PLEASE CHECK ALL APPLICABLE, IF YOUR UNIT IS: statements. Instead, you will receive a coupon book. □ OWNER-OCCUPIED 2ND HOME THAT IS NOT LEASED □ ROOMMATE OCCUPIED BY A NON-OWNER RELATIVE □ LEASED/RENTED IN WHOLE **EMERGENCY CONTACT:** NAME: _____ RELATIONSHIP: ____ PHONE: ____ PROPERTY MANAGER (third party management company): EMAIL: _PHONE: _ **If rented, please provide a copy of your lease, your tenant's contact information and Property Manager contact information for use by the Association only in the event of emergency.** □ *PM OPT-IN* EMAIL communication from SDHOA □ *PM OPT-IN* TEXT communication from SDHOA regarding all association business, communication, for EMERGENCY notices only, Ex: water shut off agendas & monthly statements. notices, safety concerns, etc. OTHER OCCUPANT/TENANT INFORMATION: NAME:______ PHONE:_____ EMAIL:_____ EMAIL: PHONE: NAME: □*TENANT OPT-IN* for TEXT communication from SDHOA for EMERGENCY notices only, Ex: water shut off notices, safety concerns, etc. **VEHICLE(S):** 1. MAKE/MODEL______PLATE #:______ PLATE #: 2. MAKE/MODEL PETS: 1. BREED/TYPE WEIGHT: ____ 2. BREED/TYPE **IMPORTANT** CHECK BELOW INFORMATION TO: □ *OPT-OUT* of sharing your contact information on the homeowner roster (available to all residents of association pursuant to Civ. Code §5200, §5205, & §5220) I, the above-named homeowner/property manager, certify that all the above information is true to the best of my knowledge. I

certify, I have received a copy of the Rules and Regulations for the above-named complex. I agree to comply with

Dated:

all Rules and Regulations of this complex and I understand I am responsible for my guests/tenants actions.