



VICTORIA PARK II
OWNER INFORMATION SHEET

LOCAL CONTACT INFORMATION

OWNER NAME(S): _____

PROPERTY ADDRESS: _____

PHONE NUMBER(S): _____ - _____ - _____ OR _____ - _____ - _____

E-MAIL(S): _____

HOMEWATCH (IF APPLICABLE):

NAME: _____ PHONE: _____ - _____ - _____

E-MAIL: _____

PRIMARY CONTACT INFORMATION (IF NOT FULL-TIME VICTORIA PARK II RESIDENT)

ADDRESS: _____

HOME PHONE (IF DIFFERENT THAN LISTED ABOVE): _____ - _____ - _____

ELECTRONIC WAIVER

I/We hereby approve Cambridge Property Management to use electronic means (e-mails provided above), written means, or hand delivery methods for any notice authorized or required to be given to myself or my representative under the provisions of my Association Covenants or State Laws of Florida until revoked by written request.

Initial: _____

I/We approve to be published in a community directory.

Initial: _____

Date: _____