

# New Resident Information Form

(Please print clearly)

Date: \_\_\_\_\_

Check Appropriate Box:		
<input type="checkbox"/> I am the Owner <input type="checkbox"/> Home on Lot <input type="checkbox"/> Lot Only Date Purchased: _____	<input type="checkbox"/> I am an Occupant – not Owner	<input type="checkbox"/> I am a Renter

Information About Fox Hollow Home or Lot:	
Street Address: _____	Lot #: _____

Information About Owner(s) and/or Resident(s):									
First Name or Nickname	M.I.	Last Name	Email Address(es) <sup>1</sup>	Main Phone Number	Other Phone Number	Birthday (mm/dd)	Wedding Anniversary (mm/dd)	Military Service Branch	Military Service Dates (yy – yy)
1.									
2.									
3.									
4.									

Emergency Contact Information:		
Name of Emergency Contact: _____	Relationship to you: _____	Emergency contact phone number (including area code): _____

If you live at another address for a portion of the year, please answer the following questions:			
Street Address: _____	City: _____	State & Zip: _____	Main Phone Number: _____
What period of the year are you at this address?			
From: _____	To: _____		

<sup>1</sup> It is clearly understood by both the resident and Fox Hollow Village Property Owners Association (FHVPOA) that email addresses provided to FHPOA may be used to communicate FHPOA or Meadowcrest related information only and shall be protected against use by unauthorized users.