

**Association Name: MAPLEWOOD HOA**

**NOTE:** *If your mail is to be sent to different locations during the year, please call or fax our office. Our system is not set up to do this automatically. Call (239) 330-7533!*

**OWNER (1) NAME:** \_\_\_\_\_ **OWNER (2) NAME:** \_\_\_\_\_

**PLEASE CHECK ONE:** \_\_\_\_\_ *Year Round Resident* \_\_\_\_\_ *Seasonal Resident*

**LOCAL CONTACT INFORMATION**

Property Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Owner (1) Cell No.: \_\_\_\_\_ Owner (2) Cell No.: \_\_\_\_\_

E-Mail Address (1): \_\_\_\_\_ E-Mail Address (2): \_\_\_\_\_

Alarm Co. (if applicable): \_\_\_\_\_ Phone: \_\_\_\_\_ Alarm Code: \_\_\_\_\_

**ALTERNATE (Away) CONTACT INFORMATION**

Property Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

**HOMEWATCH INFORMATION**

Company / Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ Phone: \_\_\_\_\_

**Who has a key to your home:** \_\_\_\_\_ Phone: \_\_\_\_\_

**TENANT INFORMATION (IF A/P) \*\*\* Please Include a Copy of Lease with this form**

Tenant Name(s): \_\_\_\_\_ Lease Dates: \_\_\_\_\_ to \_\_\_\_\_ Pets: \_\_\_\_\_

Tenant (1) Mobile: \_\_\_\_\_ Tenant (2) Mobile: \_\_\_\_\_

E-Mail Address (1): \_\_\_\_\_ E-Mail Address (2): \_\_\_\_\_

**APPROVAL TO USE ELECTRONIC METHODS FOR NOTIFICATIONS AND INFORMATION**

*I/We hereby give approval to ADG4 of Naples, LLC to use electronic means (emails 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.*

OWNER (1) SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

OWNER (2) SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_