

**Tidalholm HOA, Inc.**  
**Owner Information Form**

Property Owner's Name (s): \_\_\_\_\_

Owner's Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone numbers:

(h) \_\_\_\_\_ (c) \_\_\_\_\_ (w) \_\_\_\_\_

Email: \_\_\_\_\_

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

Phone at unit: \_\_\_\_\_

**Emergency Contact:**

Name: \_\_\_\_\_

Phone numbers:

(h) \_\_\_\_\_ (c) \_\_\_\_\_ (w) \_\_\_\_\_

Tenant Information:

Name (s): \_\_\_\_\_

Phone number (s): \_\_\_\_\_

Email (s): \_\_\_\_\_

**Terms of Lease:** \_\_\_\_\_ **Start Date of Lease:** \_\_\_\_\_ **Expires:** \_\_\_\_\_