



**YORK CONDOMINIUM CORPORATION #41
RESIDENT INFORMATION FORM**

DATE:	OWNER:	UNIT #:			
CONTACT INFORMATION:	HOME: _____		CELL: _____		
EMERGENCY CONTACT:	NAME: _____		PHONE #: _____		
UNIT INFORMATION:	LOCKER # _____	UNDERGROUND PARKING # _____	LICENSE PLATE #: _____	ADDITIONAL PARKING # _____	LICENSE PLATE #: _____
OCCUPANTS NAME(S):	FAMILY NAME		FIRST NAME	AGE	
	1. _____		_____	_____	
	2. _____		_____	_____	
	3. _____		_____	_____	
	4. _____		_____	_____	
	5. _____		_____	_____	
	USE REVERSE SIDE IF REQUIRED				
IN CASE OF EMERGENCY / EVACUATION:	IN CASE OF EMERGENCY / EVACUATION IS THERE ANY PERSON WHO MAY NEED ASSISTANCE (I.E. SIGHT, HEARING, MOBILITY IMPAIRED), OR ANY PETS WHICH MAY BE LEFT ALONE FROM TIME TO TIME? _____ _____ _____				
NOTES:	1. INSTANCE WHERE KEYS HAVE NOT BEEN MADE AVAILABLE THE COST OF FORCED ENTRY IN AN EMERGENCY SITUATION WILL BE BILLED TO THE OWNER. 2. ENTRY TO SUITES AT ANY OTHER TIME WILL ONLY BE WITH THE CONSENT AND ARRANGEMENT OF THE OCCUPANT 3. INFORMATION ON THIS FORM IS CONFIDENTIAL AND WILL ONLY BE USES BY AUTHORIZED OR EMERGENY PERSONAL. _____ SIGNATURE				