

CENSUS FORM

Please fill out the following information completely. This is the census form, which is required by the bylaws to be filled out by all residents, **regardless of pool registration**. Please return it to the Property Office no later than **June 1, 2009**. You may fax it to (201)327-4478, drop it in the mailbox, or mail it to 1225 Mulberry Drive, Mahwah NJ 07430. Note: A fine will occur if this form is not returned by the date.

*HOMEOWNER (S) NAME: _____ *PARKING SPACE #: _____
Example 56C3

*ADDRESS: _____ *TELEPHONE #: _____
Example: 1225 Mulberry Drive

*BUSINESS #: _____ *E-MAIL ADDRESS: _____

CELL PHONE #: _____

*MAILING ADDRESS (if different from unit address): _____

*HOMEOWNERS INSURANCE COMPANY & POLICY NUMBER: _____
(PLEASE ATTACH THE FIRST PAGE OF YOUR HOMEOWNERS INSURANCE POLICY TO THIS PAGE)

PLEASE PROVIDE THE NAMES OF ALL RESIDENTS OF THE UNIT. PLEASE NOTE "A" FOR ADULT AND "C" FOR CHILD AFTER EACH NAME

*RESIDENT #1: _____ *RESIDENT #2: _____

*RESIDENT #3: _____ *RESIDENT #4: _____

*RESIDENT #5: _____ *RESIDENT #6: _____

*IN CASE OF EMERGENCY, PLEASE NOTIFY: _____

MOTOR VEHICLE INFORMATION **(PLEASE LIST MAKE, MODEL, YEAR & LISCENCE PLATE#):**

*VEHICLE #1: _____

*VEHICLE #2: _____

*VEHICLE #3: _____

*DO YOU HAVE A COMMERICAL VEHICLE? _____ *COMMERICAL PARKING SPACE #: _____

*DO YOU HAVE ANY PETS ? _____ *DESCRIPTION: _____

*DO YOU CURRENTLY LEASE YOUR UNIT ? _____ *LEASE EXPIRATION: _____

*NAME & TELEPHONE # OF TENANT: _____

*BIKE STORAGE?: Y / N *BUILDING #: _____ *STORAGE ROOM NUMBER: _____

*BICYCLE LOCATION: _____

ALL ITEMS WITH AN "ASTERISK" MUST BE COMPLETED, PLEASE NOTE IF LISCENCE PLATE NUMBER IS NOT RECORDED THIS FORM WILL BE CONSIDERED INCOMPLETE.
If you have a pet, please enclose a picture of yourself with the pet please.