

# Normandy by the Sea Community Association

c/o Pilot Property Management, Inc.  
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## OCCUPANT REGISTRATION FORM

Property address: \_\_\_\_\_ Unit #: \_\_\_\_\_  
\_\_\_\_\_ Occupant(s) move in date: \_\_\_\_\_

### OWNER'S INFORMATION

Full legal name(s) of owner(s): \_\_\_\_\_

Mailing address: \_\_\_\_\_  
Street City State Zip

Home phone no.: \_\_\_\_\_ Alt. phone no.: \_\_\_\_\_

### RESIDENT'S INFORMATION

Resident(s) name: \_\_\_\_\_  
(if different from above)

Home phone no.: \_\_\_\_\_ Alt. phone no.: \_\_\_\_\_

### PARKING INFORMATION, RESIDENT(S)

Vehicle 1: \_\_\_\_\_  
License plate, make & color

Vehicle 2: \_\_\_\_\_  
License plate, make & color

### PET INFORMATION, RESIDENT(S)

Type or breed: \_\_\_\_\_ Pet's name: \_\_\_\_\_

Description: \_\_\_\_\_  
Color Weight Height License no. (if dog)

Information on additional pet on the reverse side of this form

### EMERGENCY CONTACT, RESIDENT(S)

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

Home phone no.: \_\_\_\_\_ Alt. phone no.: \_\_\_\_\_

Key for emergency access to this unit held by: \_\_\_\_\_ Phone #: \_\_\_\_\_

### ENTRANCE DIRECTORY LISTING, RESIDENT(S)

Name(s) to list: \_\_\_\_\_ Phone no.: \_\_\_\_\_

*Enter the phone number for your unit at 424 Stratford Ct. Used for building access via the entry intercom.*

### RENTED UNIT

Renter(s) has been provided a copy of Normandy by the Sea's CC&R's and Rules & Regs

Leasing agent's name/affiliation/phone #: \_\_\_\_\_

*By signing this form, I certify that all of the forgoing information is complete and accurate.*

Owner's signature \_\_\_\_\_ Date \_\_\_\_\_

Owner's signature \_\_\_\_\_ Date \_\_\_\_\_

Renter's signature (if applicable) \_\_\_\_\_ Date \_\_\_\_\_

Renter's signature (if applicable) \_\_\_\_\_ Date \_\_\_\_\_