



Homeowner/Tenant Registration Form

Ph: 702-990-9707 ~ Email: registration@lasvegashoa.com

- Primary Residence
 Second Home
 Investment Property
- I have no tenant in the unit.
 I have/will have a tenant in the unit. (Please attach copy of the lease and fill out tenant information)
 I have a Property Management Company. (Please attach a copy of the management agreement)

OWNER INFORMATION

Property Address			
Mailing Address (if different)			
Homeowner Name(s)			
Email Address(es)			
Phone - Home		Mobile (1)	
Phone - Work		Mobile (2)	
Emergency Contact Name & Phone Number			
The email address provided will only be used to send electronic notifications regarding your property and community matters.			
			If you would also like to receive US mail, please check the box <input type="checkbox"/>

TENANT INFORMATION – (IF APPLICABLE, COPY OF LEASE MUST BE SUBMITTED)

Tenant Name(s)			
Email Address(es)			
Phone - Home		Mobile (1)	
Phone - Work		Mobile (2)	
Emergency Contact Name & Phone Number			
Names of Other Occupants			

PROPERTY MANAGEMENT INFORMATION – (IF APPLICABLE, COPY OF PMA MUST BE SUBMITTED)

Company Name		Email Address	
Contact Person		Phone Number	

PET INFORMATION

PET 1		PET 2	
Type & Name		Type & Name	
Breed / Weight		Breed / Weight	

GATE DIRECTORY REQUEST – (IF APPLICABLE)

Name to be Entered into the Gate/FOB Directory <i>Last Name & First Initial Only (Smith, A)</i>			
Phone Number to be Entered into the Directory LONG DISTANCE CODES ARE ACCEPTED			
Printed number on FOB (If Applicable)		Click here if your FOB does not have a number	

Homeowner / Property Manager Signature:		Date	
Tenant Signature(s):		Date	

To the best of my knowledge, the information provided is accurate, true, and complete. By signing this form, I agree and understand that all electronic signatures are the same as my manual/handwritten signature and that I consent to be legally bound by it.