

VIÑA DEL MAR HOMEOWNERS ASSOCIATION

c/o Anchor Community Management, Inc.

P.O. Box 3237 ☛ Camarillo, CA 93011-3237 ☛ (805) 388-3848 ☛ FAX: (805) 388-0856

anchorcommunitymgt.com/vinadelmar.htm

OWNER OR TENANT REGISTRATION FORM

Date: _____

Viña Del Mar Address: _____ Camarillo, CA

Name(s) of Owner(s): _____

Mailing Address (if different): _____

If you live on-site, but get mail off-site, please check here:

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

AS OWNER, I WILL (Please check one)

LIVE IN THE UNIT

RENT OUT THE UNIT

USE THE UNIT AS A SECOND/VACATION HOME

Emergency Contact:

Name: _____

Address: _____

Phone: _____

Name of Tenant(s) (if applicable): _____

Home Phone #: _____ Work Phone #: _____

Cell Phone: _____ Email: _____

Information for vehicles to be parked onsite.

Vehicle(s):

YEAR - MAKE - MODEL

COLOR

LICENSE #

_____	_____	_____
_____	_____	_____
_____	_____	_____

As homeowner, I have provided my tenants with copies of the CC&R's, and Rules and Regulations. I understand that according to the governing documents of the Association, I am responsible for the actions of my tenants as they relate to the Association. *I further understand that as owner, I am responsible for updating this information as it changes with Anchor Community Management.*

Homeowner Signature: _____