Homeowners Questionnaire

C/O JDH Association Management Co. P.O. Box 96046 Houston, Texas 77213 Office 281-457-5341 Fax 281-457-5343

			NT INFORM			
Section 82.114(e) of the information within 30 day	Texas Uniform Condo	ominium Act r rest in a unit.	equires owners	to provide the	e Association with the following	
Property Address:		Unit#	Own	Owner □ Resident □		
Full Name:						
Mailing Address:						
Home Phone			Business Phone:			
Fax:			Mobile Phone:			
Pager:			Other:			
Email Address:						
			Drivers Lice	ense #	State	
SPOUSE INFORMA	ATION		Name:			
Business Phone:			Mobile Pho	ne:		
Pager:			Fax:			
Email Address:						
			Drivers Lice	ense #	State	
Children/Other Resident Names			Date of Birth		Gender	
# of Pets:	Breed:		Color:		Weight:	
VEHICLES						
License Tag	Year	Make	Mo	del	Color	
MORTGAGE INFO	RMATION					
Name & Address of	Lien Holder:					
Loan Number:						
Insurance Company	/ Name:					
Phone # Policy #						
	E	MERGEN	CY CONTAC	T		
Full Name: Relationship:						
				Business Phone:		
Pager:						
entitled to use the facilitie	es, and have emerger	ncy contact in	formation.		er records, identify the residents	
Section 82.114(f): A unit change in any information from time to time	t owner shall notify the n required by Subsec	e Association tion (e), and s	not later than the	ne 30 th day afe information	ter the owner has noticed of a on requested by the Association	

Please fax this completed form to 281-457-5343

Mail to: JDH Association Management, P.O. Box 96046 Houston, Texas 77213

E-mail to: Marie Barajas – marieb@jdhamc.com