Crimson Ridge Homeowners Association c/o Vision Community Management 16625 S Desert Foothills Pkwy | Phoenix, AZ 85048

Office: (480) 759-4945 Fax: (480) 759-8683 Email: CrimsonMountain@WeAreVision.com

OWNER INFORMATION / AGENT AUTHORIZATION FORM

Please use this form to provide homeowner address and contact information, and/or to authorize your agent/property manager to access your account. The following information will be kept confidential.

Homeowners Name (s):			Unit/Lot #:
Property address:			
Home Phone:		Work Phone:	
E-Mail:	Cell Phone:		
Occupancy (Please check one):			
☐ Owner Occupied-Full Time	☐ Owner Oc	cupied-Part Time	t Rental*
If this property is <u>owner occup</u>	<u>ied</u> , please provid	e homeowner vehicle information	on:
1. Make	Model	Color	Plate
2. Make	Model	Color	Plate
3. Make	Model	Color	Plate
4. Make	Model	Color	Plate
access your account.	ormation <u>only</u> if you	u would like to authorize your ago	
Agent Name/Company Name:			
Mailing Address:			
Home Telephone:		Work Telephone:	

☐ Please send a copy of all **billing statements** to my authorized Agent/Property Manager at the address listed above.