Ventana Homeowners Association c/o Vision Community Management 16625 S Desert Foothills Pkwy | Phoenix, AZ 85048 Office: (480) 759-4945 Fax: (480) 759-8683

Email: Ventana@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.

Unit/Lot #:

Homeowners Name (s):

Off-site mailing address:			
Home Phone:	Work Phone:		
E-Mail:	Cell Phone:		
Occupancy (Please check one):			
☐ Owner Occupied-Full Time	☐ Owner Occup	oied- Part Time \Box Va	cant □ Rental*
If this property is <u>owner occupi</u>	<u>ed</u> , please provide h	omeowner vehicle inform	ation:
1. Make	Model	Color	Plate
2. Make	_ Model	Color	Plate
3. Make	_ Model	Color	Plate
4. Make	Model	Color	Plate
Agent/Property Manager Author	\ 1		agent or property manager to
access your account. Agent Name/Company Name:			
access your account.			
access your account. Agent Name/Company Name:			

^{**}Only one statement can be sent out per property at no charge to the property. If you select this option, an additional \$2.50 will be billed to your account monthly per the Board of Directors**

^{*}For Rental Properties: If this property is a rental, completion of the Tenant Tracking Form is required.