Southern Crossing Homeowners' Association c/o Vision Community Management 16625 S Desert Foothills Pkwy | Phoenix, AZ 85048

16625 S Desert Foothills Pkwy | Phoenix, AZ 8504 Office: (480) 759-4945 Fax: (480) 759-8683

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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: Off-site mailing address: Home Phone: _____ Work Phone: ____ E-Mail: Cell Phone: _____ Occupancy (Please check one): ☐ Owner Occupied-Full Time ☐ Owner Occupied-Part Time ☐ Vacant ☐ Rental* If this property is owner occupied, please provide homeowner vehicle information: 1. Make _____ Model ____ Color ____ Plate ____ 2. Make _____ Model ____ Color ____ Plate ____ 3. Make _____ Model ____ Color ____ Plate ____ 4. Make Model Color Plate **Agent/Property Manager Authorization (***Optional***):** Please provide the following information only if you would like to authorize your agent or property manager to access your account. Agent Name/Company Name: _____/_____ Mailing Address: Home Telephone: _____ Work Telephone: _____ E-Mail: _____ Cell Telephone: ____

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

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

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