

Whitewater Rental Registration Form
Residential Property Owner Information

Property Street Address: _____

Property Owner Name: _____
First Middle Last

Property Owner Mailing Address: _____
Home Phone: (____) _____ - _____

Do you rent out any portion of this property to Anyone? (Circle One) YES NO
If you circled "NO", you are done; if you circled "YES", please complete the remainder of the form.

Rented Property Information

Emergency/Manager/Contact Person for Rented Property: _____

Contact Phone Number: (____) _____ - _____ E-mail: _____

Contact Address: _____
Street City State Zip

How would you prefer we contact you (circle one)? E-MAIL MAIL PHONE

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