

OWNER INFORMATION SHEET

STRATA CORPORATION #: _____ **PROPERTY NAME:** _____

PROPERTY ADDRESS: _____

UNIT # _____ **STRATA LOT #** _____ **OCCUPANCY DATE:** _____

OWNER #1 NAME: _____

MAILING ADDRESS: _____

CELL PHONE: _____ **HOME PHONE:** _____

WORK PHONE: _____ **EMAIL:** _____

OWNER #2 NAME: _____

MAILING ADDRESS: _____

CELL PHONE: _____ **HOME PHONE:** _____

WORK PHONE: _____ **EMAIL:** _____

OWNER #3 NAME: _____

MAILING ADDRESS: _____

CELL PHONE: _____ **HOME PHONE:** _____

WORK PHONE: _____ **EMAIL:** _____

EMERGENCY CONTACT NAME: _____

EMERGENCY CONTACT PHONE #'S: _____

If your building has an enterphone, please complete for programming:

ENTERPHONE NUMBER (local number only): _____

ENTERPHONE DISPLAY NAME: _____

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PLEASE RETURN TO CML PROPERTIES AT:
272 LANSDOWNE STREET, KAMLOOPS, BC V2C 1X7
Email: info@cmlproperties.ca or Fax: 250-372-5363



OWNER INFORMATION SHEET

VEHICLES PARKED IN YOUR STALL(S) (make, model, year, colour, license plate)

WILL YOU OCCUPY YOUR UNIT FULL TIME? yes no

IF NO, WILL YOU RENT OUT YOUR UNIT? yes no

IF YES, PLEASE COMPLETE BELOW AND SUBMIT FORM K, NOTICE OF TENANTS RESPONSIBILITIES, TO OUR OFFICE WITHIN 2 WEEKS OF RENTING YOUR STRATA LOT

TENANT #1 NAME: _____

CELL PHONE: _____ HOME PHONE: _____

WORK PHONE: _____ EMAIL: _____

OCCUPANCY DATE: _____

TENANT #2 NAME: _____

CELL PHONE: _____ HOME PHONE: _____

WORK PHONE: _____ EMAIL: _____

OCCUPANCY DATE: _____