



**Confidential Resident Information Sheet**

**Part A - Contact Information**

Name: \_\_\_\_\_ Unit Number: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Parking Space Number (if applicable): \_\_\_\_\_

1) Vehicle Model: \_\_\_\_\_ License Plate: \_\_\_\_\_

Vehicle Year: \_\_\_\_\_ Vehicle Make: \_\_\_\_\_ Colour: \_\_\_\_\_

2) Vehicle Model: \_\_\_\_\_ License Plate: \_\_\_\_\_

Vehicle Year: \_\_\_\_\_ Vehicle Make: \_\_\_\_\_ Colour: \_\_\_\_\_

**Part B - Emergency Contact:**

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship: \_\_\_\_\_ Relationship: \_\_\_\_\_

Are you renting your unit?      Yes      No

If you are renting the unit you are required by law to complete a Form 5 which can be found at [www.huron-shores.ca](http://www.huron-shores.ca) and email it to [huronshores@hspm.ca](mailto:huronshores@hspm.ca)

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_