

WESTEND HEIGHTS CONDOMINIUM ASSOCIATION**PARTICULARS OF RESIDENTS**

Date :- _____

Property No. _____

Name of Residents _____

Status : Owner / Tenant. E-Mail ID . _____

Telephone No. – Office _____ Resi. _____

Section 8.02 Particulars of family members (S) :-

Sr. No.	Name	Age	Sex	Relation with Owner

Section 8.03 Particulars of Servants :-

Sr. No.	Name	Age	Sex	Permanente Address

Particulars of Pets:- _____

Particulars of Vehicles :-

No.	Description	Parking No.

Signature of Resident