



OWNER INFORMATION

SL# ___ Unit # ___ Strata Plan _____

OWNER INFORMATION

Name: _____

Home Telephone #: () _____ Work Telephone #: () _____ Cell #: () _____

Email : _____ @ _____ . _____

EMERGENCY CONTACT INFORMATION

Contact's Name _____

Home Telephone #: () _____ Work Telephone #: () _____ Cell: () _____

Do you live in the unit? Yes No **Do you rent out the unit?** Yes No

TENANT INFORMATION

Name of Tenant: _____

Home Telephone #: () _____ Work Telephone #: () _____ Cell #: () _____

NON RESIDENT OWNERS – FORM K

If you rent your strata lot under the Bylaws of the Strata Corporation, you are required under Section 146 of the Strata Property Act to complete a Form K, Notice of Tenant's Responsibilities, and return it to the Strata Corporation.

I hereby authorize the Owners, Strata Plan _____ and AA Property Management Ltd. to collect, use and disclose my personal information set out above for the purposes of identifying and communicating with me, processing payments, responding to emergencies, ensuring the orderly management of the Owners, Strata Plan _____, and complying with all legal requirements.

Owner's Signature

Date: _____