

**TENANT INFORMATION FORM
GLENDALE LAKES TOWNHOME ASSOCIATION
PHASE I**

TENANT NAME: _____ DATE: _____

TENANT ADDRESS: _____

HOME PHONE: () _____ WORK PHONE () _____

SS# _____

AUTOMOBILES: License # / State / Make / Model / Color / Year

PRIMARY EMERGENCY CONTACT (Should have a key to the unit)

NAME / RELATION: _____

ADDRESS: _____

PHONE (S): _____

SECONDARY EMERGENCY CONTACT

NAME / RELATION: _____

ADDRESS: _____

PHONE (S): _____

SIGNATURE: _____

NOTE: The above information is for use by the local Fire Department when responding to an alarm, and the Property Management for control of the health, safety, or welfare of residents or property.

Mail to Alpha Management Services, PO Box 4482, Aurora, IL 60507-4482.