

Laurene Condominiums HOA

Owner Information Form

EVERY Laurene owner must return this completed form to ensure we have up-to-date records.

Owner(s) _____

Unit # (s) _____

Mailing Address

Email Address

Home Phone _____ Work Phone _____

Mobile Phone _____

Emergency Contact _____

Phone _____

RESIDENT INFORMATION

Owner Occupied: yes _____ no _____

If no, tenant information: Name(s)

Home Phone _____ Work Phone _____

Emergency Contact _____

Phone(s) _____

Please Return This Form To:

**Capitol Hill HOA Management
400 S Colorado Blvd Ste 360
Denver, CO 80246**