

EXTENDED ABSENCE INFORMATION FORM

Name:			
Address:	Unit#:	_	
Date Leaving:	Date Returning (ap	oprox):	
Phone number(s) where you can be contac	cted in case of eme	ergency:	
Phone#:			
It is recommended to have someone check condo/coach home in your absence?	k on your home. W	/ho will have access to your	
Name:		Phone#:	
Will you be taking your vehicle with you?	YES	NO	
If you are not taking your vehicle with yo your vehicle, who has a key/fob?	ou and we have a	problem which requires moving	
Name:		Phone:	
Make/Model & Color of your vehicle:			
LICENSE PLATE#:			
As per the Rules and Regulations each of Management with a key.	owner is required	to provide Schoo Association	
Schoo has a spare key:	YES	NO	

THIS INFORMATION IS CONSIDERED CONFIDENTIAL AND WILL NOT BE SHARED