BLUE RIDGE HOMEOWNERS ASSOCIATION, INC

OUT OF TOWN FORM

21425		OI I	OWN FORM	
NAME				
UNIT#	PARKING PLAZA #	ARE YOU LEAVING YOUR VEHICLE(S) IN THE PARKING LOT YES NO		
	PLATE NUMBER	IF YES, PLEASE VERIFY WHICH VEHICLE(S)		
COLOR		MAKE/MODEL YEAR		YEAR
IS SOMEONE HOUSE SITTING IN YOUR ABSENCE?		THEIR NAME ADDRESS		
YES OR NO			PHONE #()	
DEPARTURE DATE			RETURN DATE	
DOES ANYONE HAVE A KEY TO YOUR UNIT?			THEIR NAME ADDRESS	
YES OR NO			PHONE #()	
IN CASE OF EMERGENCY, WHERE CAN YOU BE CONTACTED ADDRESS				
TELEPHONE # ()				
IS THERE ANYTHING THAT SECURITY SHOULD KNOW ABOUT YOUR UNIT SUCH AS ALARMS, AUTOMATIC LIGHTS, ETC.? PLEASE LIST BELOW				
2. Pagistust				

cc: Registration Department