



REYNARD RUN

REYNARD RUN TOWNHOME ASSOCIATION

RESIDENT/OWNER PROFILE FORM

(Please print legibly)

Unit # _____

Name(s) of Owner(s): _____

Mailing Address:

Phone Number(s):
Home: _____
Work: _____ (Name) _____
Work: _____ (Name) _____

E-Mail Address: _____
(Will also be used for monthly dues invoices)

Emergency Contact: _____
Phone Number: _____

List the name of ALL persons residing in the Unit:

(Please include yourself)

Is this home lived in by owner ___ or rented ___ ?

(If rented, please complete below)

Auto Information (required):

Year _____ Color _____

Make/Model _____

License Plate # _____ State _____ Permit # _____

(Assigned by Assoc)

Auto Information (required):

Year _____ Color _____

Make/Model _____

License Plate # _____ State _____ Permit # _____

(Assigned by Assoc)

Renter Information (required):

Name(s) of Renter(s): _____

(All Unit Occupants must be listed)

Phone Number(s):

Home: _____

Work: _____ (Name) _____

Work: _____ (Name) _____

Emergency Contact: _____

Phone Number: _____

Lease start: _____ **Lease End:** _____

Renters Insurance Policy Number: _____

Agent: _____ **Phone Number:** _____

****Enclose a copy of Declaration Page*

**Attach a current copy of the lease. No less than 1 year. Complete vehicle information section
(per the Master Deed and By-Laws)**

Mortgage Information:

(required per the Master Deed and By-Laws)

Name of Mortgage Holder: _____

Address of Mortgage Holder: _____

Telephone Number: _____

Home Owners Insurance:

*(required) ***Please attach a copy of the Declaration Page)*

Name of Insurance Company: _____

Policy Number and Dates: _____

Thank you for completing the information as requested.

Please return to:

LostPropertiesLLC@gmail.com or by mail

Lost Properties

P.O. Box 598

Moorestown, NJ 08057

**This information is confidential and will only be used for contact and emergency purposes by
the Association and its representatives. No information will be released to any other
organization.**