

**SEA PALMS NORTH COTTAGES HOA  
REQUESTED OWNER INFORMATION**

**LOT #:** \_\_\_\_\_

**Owners Name(s):** \_\_\_\_\_

**Owners Address:** \_\_\_\_\_

\_\_\_\_\_

**Owners Contact Numbers:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

**Do You Own A Pet(s):** \_\_\_\_\_

**If Yes, Give Description:** \_\_\_\_\_

**Is Your Home a Rental, Second Home or Primary Residence?** \_\_\_\_\_

**If Rental, Name of Management Company:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Phone Numbers:** \_\_\_\_\_

**Tenants Name(s):** \_\_\_\_\_

**Tenants Phone Numbers:** \_\_\_\_\_

**Number of People Living In The Unit:** \_\_\_\_\_

**Does Your Tenant Have a Pet(s)** \_\_\_\_\_

**If Yes, Give Description:** \_\_\_\_\_

**Name of Insurance Carrier:** \_\_\_\_\_

**Agents Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**PLEASE FILL OUT THE INFORMATION LISTED ABOVE AND RETURN TO  
THE MANAGEMENT COMPANY. ATTN: RENAE KIRK  
SEA PALMS NORTH COTTAGES HOA  
165 FOLLINS LANE  
ST. SIMONS ISLAND, GA 31522**

