

Bel Aire Village Homeowners Association
Confidential Resident Information Form – 2020

*Information will not be shared. Residents would only be contacted via phone or email in the event of an emergency.

Property Owner(s) Name(s) _____

Property Address: _____ Bel Port Drive # _____ Owner Primary Phone(_____) _____

Owner Mailing address (if different from Property): _____

Email _____ Emergency Contact #(_____) _____

Owner (Family) Occupied? Yes _____ No _____ Property Leased? Yes _____ No _____

***If property is leased please include complete contact information for the occupant(s).

Please Provide the following information if the property is leased, or skip to Household Occupants if owner occupied:

Property Management Company _____

Manager (PM) _____ PM Phone #(_____) _____

PM Email _____

Household Occupant(s):

Primary Lessee _____ Spouse/Partner _____

All other Household Occupant(s):

Name: _____ Name: _____

Name: _____ Name: _____

Primary Lessee Phone # (_____) _____ Secondary # _____

Resident Occupant has been provided a copy of the CC&R's & Rules and Regulations for the Community?*

*This is a requirement. Yes _____ No _____

Vehicle Information: (if you have more than 2 vehicles, please use the back of this page for additional vehicles)

Registered State _____

Registered State _____

License Plate # _____

License Plate # _____

Make/Model/Year _____

Make/Model/Year _____

Color _____

Color _____

Please Return This Form To:

P&G Association Management

129 W Lake Mead Parkway Suite 16

Henderson NV 89015

Email to Joan.pgam@outlook.com, Fax to 702-202-3910 or U.S. Mail.