

Coppershire Condos Vital Information Form

Basic Details:

Coppershire Address: _____ Lake Ave. (Enter the relevant Coppershire unit number, 2-67.)

I am the: Owner Renter (Check one.)

If you are the owner: I live in my unit I rent my unit (Check one.)

If you are the owner and do not reside in your unit, please provide your mailing address:

If you rent your unit, please list the end date of the current lease: _____

Owner's Primary Contact Details:

(Provide the details below for the unit's owners main contact, including at least one phone and email.)

Name: _____

Phone: Cell: _____

Home: _____

Work: _____

Email: Personal: _____

Work: _____

Other: _____

Do you want your contact information provided in a directory to go to ALL owners?

Yes _____ No: _____

Phone: _____

Email : _____

Other: _____

Unit Occupant Details:

Number of Occupants: _____ (List the total number of people who reside in the unit, including you.)

(Provide the details below for any additional occupants.)

(Is this person under the age of 18?)

Name: _____

No Yes

Relationship: _____

Phone: _____

Email: _____

Name: _____

No Yes

Relationship: _____

Phone: _____

Email: _____

Name: _____

No Yes

Relationship: _____

Phone: _____

Email: _____

Name: _____

No Yes

Relationship: _____

Phone: _____

Email: _____

Occupant Vehicle Details:

(Provide the following details for any vehicle which belongs to an occupant of your unit and could be parked on Coppershire property.)

Vehicle 1: Make: _____ Model: _____
Color: _____ Plate #: _____ State: _____
Owner: _____

Vehicle 2: Make: _____ Model: _____
Color: _____ Plate #: _____ State: _____
Owner: _____

Vehicle 3: Make: _____ Model: _____
Color: _____ Plate #: _____ State: _____
Owner: _____

Vehicle 4: Make: _____ Model: _____
Color: _____ Plate #: _____ State: _____
Owner: _____

Office Use Only:

Date Received: _____

Info Updated By (Initials): _____

Owner Emergency Contact Details:

(In case of an emergency where you could not be reached, please provide an emergency contact, preferably someone who does not reside in the unit.)

Name: _____

Relationship: _____

Phone: _____

Email: _____

Return Details:

(Please return the completed form promptly via any of the methods listed below.)

Mail: Kentucky Realty Corporation
3944 Bardstown Road
Louisville, KY 40218

Attention: Darren Harris
Email: dh@kyrealtyonline.net
Fax: 502-473-7269

Privacy & Important Details:

Information provided on this form will be kept confidential and shall be used as necessary solely by the management company and/or the Board for day-to-day operations, emergency response, and/or communications of Coppershire. No details will be sold or distributed.

All owners are responsible for returning a fully completed form annually by a set deadline or within 30 days of any change of details. Owners are also responsible for ensuring their renters complete the form. Failure to return the completed form, by owners and/or renters, may result in fines being placed on the owner’s account.