



**REEFGATE WEST HOMEOWNERS ASSOCIATION
HOMEOWNER INFORMATION FORM**

Dear Homeowner,

In the effort to establish an efficient and open line of communication between the Board, Management, and Homeowners, we kindly request that you please complete this form so that we may update your homeowner file.

When complete, please mail in the enclosed self addressed envelope or fax this form to TSG Independent Property Management, Inc. at 949.481.0556 or send it via email at escrow@tsgindependent.com.

Thank you for your cooperation!

----- Please complete the section below -----

Name(s): _____

Reefgate Unit Number(s): _____

Offsite Address(s): _____

Phone Number(s): **Unit Phone:** _____ **Primary Residence:** _____

E-mail: _____

Emergency Contact: _____

Emergency Phone: _____