

**Snowline Inn Condominium Association  
OWNER CONTACT INFORMATION FORM**

**Owner Names:** \_\_\_\_\_ **Unit #** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Home Phone:** \_\_\_\_\_

**Cell :** \_\_\_\_\_

**FAX:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Vehicle Make, Model & License Number:** \_\_\_\_\_

**Vehicle Make, Model & License Number:** \_\_\_\_\_

**Emergency contact name & #:** \_\_\_\_\_  
\_\_\_\_\_

**Mortgage Company for the Condo** – I need this updated information as loans are bought and sold regularly. Per law, I am supposed to have this information on file.

\_\_\_\_\_  
\_\_\_\_\_

**Tenant/Rental information on Unit #:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Condo Insurance coverage - Company/Agent/Phone:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Thank you for the information, you never know when there will be an emergency situation when this information is needed. Please return this form to: INTEGRA Condominium Association Management, Inc., P.O. Box 31936, Bellingham, WA 98228.**