



**SUNDIAL
REAL ESTATE**

Sundial Real Estate
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Association Information Form

CLIENT INFORMATION			
LAST NAME		FIRST NAME	MIDDLE NAME
PRESENT ADDRESS		CITY	STATE ZIP CODE
HOME PHONE	WORK PHONE	CELL PHONE	
SPOUSE/PARTNER INFORMATION			
LAST NAME		FIRST NAME	MIDDLE NAME
PRESENT ADDRESS		CITY	STATE ZIP CODE
HOME PHONE	WORK PHONE	CELL PHONE	
1. ASSOCIATION INFORMATION			
ASSOCIATION NAME			
NAME OF MANAGEMENT COMPANY FOR ASSOCIATION			
ADDRESS		CITY	STATE ZIP CODE
PHONE NUMBER		FAX NUMBER	
ACCOUNT NUMBER		MONTHLY MAINTENANCE FEES	
CONTACT PERSON		PHONE NUMBER	
UTILITIES INCLUDED IN ASSOCIATION DUES (check all boxes that apply)			
<input type="checkbox"/>	Water	<input type="checkbox"/>	ELECTRIC
<input type="checkbox"/>	Trash	<input type="checkbox"/>	Cable
<input type="checkbox"/>	Gas	<input type="checkbox"/>	Other: _____
SERVICES PROVIDED BY ASSOCIATION			
<input type="checkbox"/>	Gardening Service	<input type="checkbox"/>	Front Only
<input type="checkbox"/>	Other (specify):		
<input type="checkbox"/>	Roof Repair	<input type="checkbox"/>	Other: _____
<input type="checkbox"/>	Plumbing	<input type="checkbox"/>	Other: _____
AMENITIES/SERVICES PROVIDED BY ASSOCIATION			
<input type="checkbox"/>	Pool	<input type="checkbox"/>	Tennis
<input type="checkbox"/>	Spa	<input type="checkbox"/>	Ball courts
<input type="checkbox"/>	Clubhouse	<input type="checkbox"/>	Tot lots
<input type="checkbox"/>	Other: _____		
<input type="checkbox"/>	Other: _____		
<input type="checkbox"/>	Other: _____		
PARKING INFORMATION			
Carpport or space numbers:			
If garage is not attached, please provide location and/or garage number:			
Are there any guest parking passes? <input type="checkbox"/> YES <input type="checkbox"/> NO			
MAILBOX INFORMATION			
Mailbox location:		Mailbox number:	