

# The Shores

## EMERGENCY CONTACTS AND PERMANENT GUESTS

OWNER(S) NAME: \_\_\_\_\_

LOT #: \_\_\_\_\_

Other Residents (including children and pets): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Shores Address: \_\_\_\_\_

Home phone#: \_\_\_\_\_

Alternate Address: \_\_\_\_\_

Business phone#: \_\_\_\_\_

\_\_\_\_\_

Cell phone 1: \_\_\_\_\_

\_\_\_\_\_

Cell phone 2: \_\_\_\_\_

### Emergency Contacts

Primary Emergency Contact Name: \_\_\_\_\_

Phone # \_\_\_\_\_

Other Emergency Contact Name: \_\_\_\_\_

Phone # \_\_\_\_\_

Property Care Taker Name: \_\_\_\_\_

Phone # \_\_\_\_\_

Primary Contact Number When Not In Residence: \_\_\_\_\_

*I do hereby authorize Shores Access Control to allow the following person(s) access to my home at The Shores:  
By providing the following names, I confirm that none of the people listed below is leasing my/our home.*

### Permanent Guests

\_\_\_\_\_

NAME

\_\_\_\_\_

NAME

\_\_\_\_\_

NAME

\_\_\_\_\_

NAME

\_\_\_\_\_

NAME

\_\_\_\_\_

NAME

\_\_\_\_\_

NAME

\_\_\_\_\_

NAME

(If you have a guest entering the property who is not listed on this form, please call the gate house to let them know whom you expect and what time they will be arriving.)

*I fully understand that it is my sole responsibility to notify the Access Control of any and all changes that may occur.*

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

Date Received \_\_\_\_\_

# THE SHORES

## VENDOR CONTACT INFORMATION

Date Submitted: \_\_\_\_\_

Date Updated: \_\_\_\_\_

Property Owner(s): \_\_\_\_\_

Shores Address: \_\_\_\_\_ Lot # \_\_\_\_\_

Property Care Taker: \_\_\_\_\_ Phone # \_\_\_\_\_

Local Insurance Agent: \_\_\_\_\_ Phone # \_\_\_\_\_

Alarm Company: \_\_\_\_\_ Phone # \_\_\_\_\_

Housekeeper: \_\_\_\_\_ Phone # \_\_\_\_\_

Pool Service: \_\_\_\_\_ Phone # \_\_\_\_\_

Lawn Service: \_\_\_\_\_ Phone # \_\_\_\_\_

Pest Control: \_\_\_\_\_ Phone # \_\_\_\_\_

Tree Service: \_\_\_\_\_ Phone # \_\_\_\_\_

A/C Service: \_\_\_\_\_ Phone # \_\_\_\_\_

Plumber: \_\_\_\_\_ Phone # \_\_\_\_\_

Electrician: \_\_\_\_\_ Phone # \_\_\_\_\_

Roofer: \_\_\_\_\_ Phone # \_\_\_\_\_

Other: \_\_\_\_\_ Phone # \_\_\_\_\_

Other: \_\_\_\_\_ Phone # \_\_\_\_\_

Other: \_\_\_\_\_ Phone # \_\_\_\_\_

Other: \_\_\_\_\_ Phone # \_\_\_\_\_

Additional house keys (for emergency) are held by:

\_\_\_\_\_ Phone # \_\_\_\_\_

\_\_\_\_\_ Phone # \_\_\_\_\_