

HOMEOWNER INFORMATION FORM  
SANDALWOOD HOMEOWNERS ASSOCIATION

PROPERTY ADDRESS: \_\_\_\_\_

Homeowner(s) Name(s): \_\_\_\_\_

\_\_\_\_\_

Home Phone of Homeowner(s): \_\_\_\_\_ Business Phone: \_\_\_\_\_

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

TENANT INFORMATION

Name(s) of Renter(s): \_\_\_\_\_

Mailing Address of Renter(s): \_\_\_\_\_

Home Phone of Renter(s): \_\_\_\_\_ Business Phone: \_\_\_\_\_

Total Number of Occupants: \_\_\_\_\_ Total Occupants under 18 years of age: \_\_\_\_\_

Children (Names and Ages): \_\_\_\_\_

\_\_\_\_\_

Vehicles:

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_ License: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_ License: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_ License: \_\_\_\_\_

Pets:

Animal: \_\_\_\_\_ Breed: \_\_\_\_\_ Color: \_\_\_\_\_ License: \_\_\_\_\_

Animal: \_\_\_\_\_ Breed: \_\_\_\_\_ Color: \_\_\_\_\_ License: \_\_\_\_\_

Do you have a copy of the current Rules and Regulations? \_\_\_\_\_ Yes \_\_\_\_\_ No

Note: Copies are available through Spectrum Property Services 805-642-6160.

Homeowner Signature

Date \_\_\_\_\_

Renter Signature

Date \_\_\_\_\_

Homeowner Signature

Date \_\_\_\_\_

Renter Signature

Date

Mail completed form to:

Spectrum Property Services

P.O. Box 5286

Ventura, CA 93005