

Moreland Courts Condominium Association, Inc.

13415 Shaker Boulevard, Cleveland, Ohio 44120 Phone: (216) 751-1100 Fax: (216) 751-5744

OWNER/RESIDENT INFORMATION FORM

The undersigned hereby submits the following information in connection with the purchase or lease of Moreland Courts Suite number _____.

PLEASE COMPLETE THE FOLLOWING INFORMATION:*

	<u>Owner/resident #1</u>	<u>Owner/resident #2</u>
Name(s):	_____	_____
Current Street Address	_____	_____
City, State, and Zip	_____	_____
Home Phone	() _____	() _____
Cell Phone	() _____	() _____
E-mail	_____	_____
Business Name(s):		
Street Address	_____	_____
City, State, and Zip	_____	_____
Phone Number	() _____	() _____
Emergency Contact Name(s):	_____	
Relationship(s):	_____	
Phone Number(s):	_____	
Names, relationship, and ages of all persons who will occupy the suite:	_____	

Specify number, breed, and size of your pets (<u>NOTE: MCCA Rules apply to all pets</u>):	_____	

* NOTE: Ohio condominium law and the Association's governing documents require that Owners and/or residents must notify MCCA in writing of any changes to the above information within 30 days of the change.

I understand that the Moreland Courts Condominium Association, Inc. (MCCA) and all Owners and residents of MCCA are governed by the MCCA Declaration, By-Laws, Rules Book, and Policies and Procedures. I certify that I have received copies of these governing documents. As the Owner/resident of an MCCA Unit, I agree to abide by these governing documents and understand that they may be changed by the Association and/or the Board of Directors. Further, I acknowledge my responsibility to maintain my Unit and to pay all applicable fees and assessments on a timely basis.

Owner/resident #1

Date

Owner/resident #2

Date