



# TANOAN COMMUNITY EAST ASSOCIATION, INC.

## OWNER REGISTRATION

**TO BE COMPLETED AND SIGNED BY HOMEOWNER**

**Complete all items.** Do not list "no change" or "same as before" – as we may not have complete and accurate information.

### OWNER INFORMATION **(Please Print Clearly)**

Home Phone (this is the landline for the home. If none, leave blank)

(this is the Legal Owner(s) of the property - the name(s) on the title)

Property Address in Tanoan East:		Owner's Mailing Address (if off-site): Address: _____ City, State, Zip Code: _____	
Owner #1 Name:	Owner #1 Cell Phone:	Owner #1 E-mail:	
Owner #1 Employer:	Owner #1 Work Phone:	Owner #1 Work E-mail:	
Owner #2 Name:	Owner #2 Cell Phone:	Owner #2 E-mail:	
Owner #2 Employer:	Owner #2 Work Phone:	Owner #2 Work E-mail:	
Emergency Contact - Name:	Telephone:	Relationship to Owner:	

### OTHER RESIDENTS OF THE HOME

Other than the owners listed above, list any other residents who live in the home. This includes children as well as any other individuals who live at this address.

Resident's Name:	Resident's Cell Phone:	Relationship to Owner:
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This list will be used to verify which individuals - as residents - are eligible to obtain a vehicle windshield tag and gate entry cards.  
**THE HOMEOWNER CERTIFIES THAT THE INDIVIDUALS LISTED HERE LIVE IN THE OWNER'S HOME AT THE ADDRESS LISTED ABOVE IN TANOAN COMMUNITY EAST.**

**FOR RENTAL PROPERTIES, YOU WILL NEED TO SUBMIT A TENANT INFORMATION SHEET AND A COPY OF THE LEASE. THE MINIMUM LEASE TERM IS SIX MONTHS. The Tenant Information Sheet is available on the website – [www.tanoaneastnews.com](http://www.tanoaneastnews.com) (Homeowners are responsible for enforcing the rules and regulations of the Association with their tenants.)**

I certify that this information is correct and complete. I received a copy of the Governing Documents for Tanoan Community East Association Inc. at purchase. I agree to comply with all rules and regulations, and to update this information with the Management Company if changes occur.

**Owner Signature:** **X** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please return this form to: HOAMCO**

**By e-mail: AMcFall@HOAMCO.com**

**By mail or hand delivery:**

**10555 Montgomery N.E., Building One, Suite 100, Albuquerque, New Mexico 87111-3872**

(Between Savoy & El Patron restaurants)