

SUMMER PLACE CONDOMINIUM ASSOCIATION

INFORMATION SHEET

Please fill out a separate sheet for each unit you own and return to:

Showcase Property Management Fax: 321-868-1090
101 S Courtenay Pkwy Email: spacecoastLCAM@gmail.com
Merritt Island, FL 32952 Direct: 321-328-3024

OWNER INFORMATION

Name(s): _____

Unit(s) Owned: _____

Do you reside in your unit? ☐ Yes ☐ No If you own multiple units, which one do you reside in: _____

Physical Address: _____

Mailing Address: _____

Are you a seasonal resident? ☐ Yes ☐ No If you own multiple units, which one do you stay in: _____

If so, what usual date range or months do you stay on property? _____

Phone #: _____ ☐ Home ☐ Work ☐ Cell Email: _____

Phone #: _____ ☐ Home ☐ Work ☐ Cell Email: _____

Do you have a pool fob? ☐ Yes ☐ No Pool Fob #: _____

Emergency Contact Information

Name(s) & Relationship(s) to You: _____

Phone #: _____ ☐ Home ☐ Work ☐ Cell Email: _____

If you, the Owner, **do** reside on the condominium property, please list your vehicular details:

Auto 1 Make: _____ Model: _____

Color: _____ Tag #: _____ State: _____

Auto 2 Make: _____ Model: _____

Color: _____ Tag #: _____ State: _____

☐ Check here if you **do not** have a tenant in your unit

Please read and sign: It my responsibility as the Owner to update Showcase with any changes to my contact information. I understand that failure to do so and the non-receipt of correspondence (including account statements or violation letters) does not exempt me from the normal processes of handling such situations. It is also my responsibility to abide by the rules and regulations of the community and all Association documents. This information can be reviewed online via our website: <https://showcasewelcome.com/assoc-grid> or on the community website: www.summerplacebrevard.com

I certify that I have read the statements above and understand my responsibilities:

Owner(s) Signature: _____ Date: _____

FOR OFFICE USE ONLY Date Received: _____ Received by: _____

Was the information verified/updated? ☐ Yes ☐ No

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TENANT INFORMATION

Please attach a copy of your lease prior to submission.

Check which applies to you: ☐ An Agent/Company handles my rental ☐ I manage my rental

Name of Agent/Company: _____

Name(s) on Lease: _____

Lease Start Date: _____ Lease End Date: _____

of Adults: _____ # of Children: _____ # of Pets & Type: _____

(Occupants are limited to two (2) household pets (cats or dogs) not exceeding forty (40) pounds each per unit.)

Phone #: _____ ☐ Home ☐ Work ☐ Cell Email: _____

Phone #: _____ ☐ Home ☐ Work ☐ Cell Email: _____

Auto 1 Make: _____ Model: _____

Color: _____ Tag #: _____ State: _____

Auto 2 Make: _____ Model: _____

Color: _____ Tag #: _____ State: _____

Does the tenant have a pool fob? ☐ Yes ☐ No Pool Fob #: _____

Tenant's Emergency Contact Information

Name(s) & Relationship(s) to Tenant: _____

Phone #: _____ ☐ Home ☐ Work ☐ Cell Email: _____

Please read and sign: I have either provided the tenant with a copy of the community's rules and regulations **or** have reviewed/explained the rules and regulations to them. I understand that their failure to comply will result in violation letters addressed to me as the Owner and it is my responsibility to have the tenant correct the violations.

My tenant is also aware that the Association documents can be accessed via Showcase's website:

<https://showcasewelcome.com/assoc-grid>

I certify that I have read the notice above and understand my responsibilities:

Owner(s) Signature: _____ Date: _____

Agent/Company Signature: _____ Date: _____

FOR OFFICE USE ONLY Date Received: _____ Received by: _____

Did we receive a copy of the lease? ☐ Yes ☐ No Was the information verified/updated? ☐ Yes ☐ No