



# Center Court Condominium

P.O. Box 86209  
Montgomery Village, MD 20886

## Resident Information Sheet

All sections should be completed in their entirety. Management's intent is to facilitate communication in the event of an emergency. Please return the completed form to Clarity Management at the address below or by email to CCC@claritycommunities.com.

### Section A – Owner Information

Name:			Phone:
Building Address:		Apt. Number:	Alt-Phone:
			Email:
Mailing Address (if different):			Unit Emergency Contact:
City:	State:	Zip:	Name:
Unit insured (circle one): Y N		Carrier:	Phone:
Check all that apply: ( ) Owner ( ) Resident ( ) Agent			Alt-Phone:
Signature of owner below acknowledges that said individual(s) as checked above may act on my behalf regarding CCC matters as permitted by law. Management reserves the right to work directly with the owner on issues pertaining to the referenced unit should it be deemed necessary. Owner has also reviewed the resident and household member section of the application and can attest to its accuracy.			Name of Agent:
			Phone:
Owner Signature:			Date:

### Section B – Resident Information

If sole resident owner, go to section C of the form. Otherwise 2 <sup>nd</sup> owner information goes here. Tenant resident must complete all sections of the form.		Secondary tenant or leaseholder information goes here. If you are the sole leaseholder or the resident owner, please go to section C of the form.	
Name:	DOB:	Name:	DOB:
Phone:	Alt-Phone:	Phone:	Alt-Phone:
Email:		Email:	
Emergency Contact:		Emergency Contact:	
Emergency Phone:		Emergency Phone:	

### Section C – Household Members

Tenant resident must have a lease on file with named household members in order to receive pool passes for the occupants. Resident owners must list household occupants to receive pool passes for the individuals.

Name of Occupant(s)	Date of Birth	Emergency Contact Information (Name and phone #)
Resident Signature:		Date:

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