

CASITAS AT MORNINGSTAR RESIDENT INFORMATION

Name(s) _____ Unit # _____

Primary telephone to be used with the gates: _____

Names and Relationships and Ages of persons residing in the unit: (list phone numbers if applicable)

Pets Names, Weights and Breeds: (if applicable)

Vehicle Make, Model, Color, License Plate and State:

Make: _____ Model: _____ Color: _____ Year: _____ Lic# _____ State: _____

Make: _____ Model: _____ Color: _____ Year: _____ Lic# _____ State: _____

Make: _____ Model: _____ Color: _____ Year: _____ Lic# _____ State: _____

Make: _____ Model: _____ Color: _____ Year: _____ Lic# _____ State: _____

The HOA will be using this information to issue your parking decals, register your pet(s) and issue gate and amenity door codes so please be thorough.

With this form you will need to attach the following:

- 1) Selfie(s) for amenity passes to be issued by the HOA
- 2) Pet photos and vaccination records for registration with the HOA

If you have any questions about items 1-2 please call the HOA at 575-532-9416 or email them directly at hoamanager@1stvalley.com