

Greenmont Walk HOA

Homeowner and/or Resident Information

Your assistance in completing and returning this questionnaire will ensure that our records are current. Please **email** the completed form to <u>goatreasurer@greenmontwalk.com</u> or **mail** to: Greenmont Owners Association, PO Box 1103, Alpharetta GA 30009.

Owner First Name(s)	Owner Last Name(s)				
Property Address					
City/State/Zip Owner Mailing Address (if different from above) City/State/Zip Best Contact Number(s) Email(s)					
			IF your property is a Rental, ple	ease provide the renter's contact information:	
			Renter First & Last Name		
			Phone	Email	
is a secure document and only a e-communication The GOA would like to enhance	our ability to communicate with our homeowners/residents. Therefore, we gn up to receive email communications from the HOA. You can either sign	lt			
Please check box(es) below to	o which you wish to be included:				
\square include all my informatio	n in the directory				
☐ include name, address &	phone number <u>only</u> in the directory				
☐ include name, address &	email <u>only</u> in the directory				
\square include renter information	n in the directory				
\square include renter name, add	lress & phone number <u>only</u> in the directory				
\square include renter name, add	Iress & phone email <u>only</u> in the directory				
☐ include in "e-communica	ation"				
☐ include renter in "e-comr	nunication"				