

SOUTHWIND LAKES HOMEOWNERS ASSOCIATION
C/O SUPERIOR ASSOCIATION MANAGEMENT
20283 STATE RD. 7 SUITE 219, BOCA RATON, FL 33498 (561)-293-3612

OWNER INFORMATION

RESALE

RENTAL (*attach current rental agreement*)

Owner's Name: _____

Address: _____

Contact Number(s): _____

Email Address: _____

Alternate Address (if not a year-round resident):

Renter's Name (if applicable): _____

Contact Number: _____

Lease Term (please include lease): _____

Pets: Dogs. How Many? _____

Breed: _____ Name: _____ Weight: _____

Breed: _____ Name: _____ Weight: _____

Emergency Contact: _____

House Sitter: _____ Contact Number: _____

Please complete this form with an EXECUTED LEASE or CLOSING DOCUMENTS and
A CHECK PAYABLE to SOUTHWIND LAKES HOA for \$100.00.

20283 State Road 7, Suite 219, Boca Raton, FL 33498

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