RPW INFORMATION SHEET

UNIT#

RESIDENT REGISTRATION-PLEASE PROVIDE

- 1) Photo 1.D.
- 2) Copy of Lease signed and dated by all parties
- 3) Executed Lease Addendum from Shareholder signed and dated by all parties
- 4) \$25.00 registration fee (per person) non-refundable check or money orders only. Made payable to River Place West NO CASH PLEASE

| Name (First & Last): | | Phone: | |
|----------------------------|------------------|--|---------------------------------|
| Email:: | | | |
| Name (First & Last): | | Phone: | |
| Email: | | FOB# | |
| Name (First & Last): | | Phone: | |
| Email: | | FOB# | |
| EMERGENCY <u>CONTACT</u> : | | Phone: | |
| Relationship: | | | |
| We have received the Ri | ver Place West R | ules & Regulations, and agree to abide by th | nese rules during my residency. |
| SIGNED:. | | DATE: | |
| | | ANCE DURING EMERGENCY EVACUATION OF T | |
| | | WELCOME TO RIVER PLACE WEST | |
| | | ! | |
| | | **FOR FRONT DESK USE ONLY** | |
| LEASE TERM | ТО | Check/MO# | Concierge Initials |
| | | llowing: lease, RPW lease addendum, j | |
| Update 6/2021 | | | |