



SANTA CLARA

RESIDENT INFORMATION FORM

Dear Resident: Please fill out the following registration form and return to your community office. This information will be kept confidential and is used in such cases as fire, storms etc. If you have any changes throughout the year, please notify your community office.

GENERAL INFORMATION

Primary Resident Names: _____ Date filling out form: _____

Mailing Address: _____ Site Number: _____

Home Phone: _____ Work Phone: _____ Cell/Other: _____

Home Phone: _____ Work Phone: _____ Cell/Other: _____

(PLEASE CIRCLE THE NUMBER TO BE USED FOR EMERGENCY AUTO CALLING SERVICE)

HOME OWNER, RESIDENT, LESSEE, OCCUPANT INFORMATION (List ALL occupants living in home)

Name: _____ Name: _____ Name: _____

Date of Birth: _____ Date of Birth: _____ Date of Birth: _____

Relationship: _____ Relationship: _____ Relationship: _____

Name: _____ Name: _____ Name: _____

Date of Birth: _____ Date of Birth: _____ Date of Birth: _____

Relationship: _____ Relationship: _____ Relationship: _____

HOME INFORMATION

Name on Title to home: _____

Make of Home: _____ Width/Length of home: _____

Serial Number: _____ Year: _____

A COPY OF THE TITLE TO YOUR HOME MUST BE ON FILE AT THE OFFICE PER OHIO LAW. PLEASE PROVIDE A COPY UPON RETURNING THIS FORM TO THE OFFICE.

VEHICLE REGISTRATION

Make: _____ Model _____ Year: _____ Color: _____

Make: _____ Model _____ Year: _____ Color: _____

Make: _____ Model _____ Year: _____ Color: _____

EMERGENCY CONTACT INFORMATION

Current Employer: _____ Phone Number: _____

Emergency Contact: Name: _____ Relationship: _____

Their preferred Phone: _____ Cell or Secondary Number: _____

PETS IN THE HOUSEHOLD

What pets are present in your home? Cat Dog Type of dog: _____

What pets are present in your home? Cat Dog Type of dog: _____

Have you provided a copy of the current year's dog(s) registration and vaccination record? Yes No

If you answered no, please provide this information upon returning this form to the office.

IF THERE IS A LOAN ON YOUR HOME

Name of Bank/Finance Company: _____ Phone Number: _____