Capitol Park Owners Association, Inc.

C/O Watson Association Management, LLC. 1410 Palm Coast Parkway NW Palm Coast, FL 32137

OWNER INFORMATION SHEET

In order to keep our records updated we are asking that you provide us with the current information.

OWNER(S) NA	AME:		Closing Date:
PROPERTY A	DDRESS:		
TENANT NA	ME (if any):		
	e: Lease end date:		
AWAY ADDR	ESS:		
CURRENT MA	AILING ADDRESS:	PROPERTY ADDRESS	□ AWAY ADDRESS
LOCAL PHON	E NUMBER:	AWAY I	PHONE NUMBER:
completing, sig Association, In- actions taken by Your email add	gning, and returning thing c. and Watson Association the Board at those meet ress will not be used for a	s form, you are authorizing on Management to send you ings, violations, updates and/o	nails to owners without their written consent. By the Board of Directors of Capitol Park Owners information of the Association meetings, reports on or special information. listed in the previous sentence. ues regarding your investment as an owner in Capitol
Yes □	I authorize Capitol Park and Watson Association Management to email me appropriate meeting notices, agendas, reports, violation letters and other information.		
	Email Address:	(PRINT)	
	Signature(s):		
	Printed Name(s):		
<u>No</u> □	I do not want to receive	emails from Capitol Park and	l Watson Association Management.