

**TARPON HARBOR II AT MYAKKA POINTE CONDOMINIUM ASSOCIATION, INC.
OWNER INFORMATION SHEET**

Name (s): _____

Property Address: _____

Home Phone #: _____ Fax #: _____

Cell # (& Name): _____ Cell # (& Name): _____

E-mail Address: _____ E-mail Address: _____

Alternate Mailing Address:

Address: _____ City: _____ State: _____ Zip: _____

Home Phone #: _____ Work Phone #: _____

Do You Live At Your Association Address: **Year Round** ____ **Seasonal** ____ **Used For Investment Only** ____

Seasonal Residents: Approximate Dates of Occupancy: _____

Rental/Investment: Is The Unit Used For Rental? YES ____ NO ____ **If yes,(dates):** _____

Do You Use A Rental Agent? YES ____ NO ____ If Yes, Company _____

Agent's Name _____ Phone #: _____

Emergency Contact Information: Name: _____ Phone #: _____

Signature of person completing form: _____ Date _____

Please complete this sheet and fax to 941-875-9397 or mail to the following address:

**Tarpon Harbor II
C/O Palmer Property Management
6210 Scott Street, Unit 214
Punta Gorda, FL 33950
Anthony@myppm.net**