

**OWNER/RESIDENT INFORMATION FORM**  
**TOPAZ at the MALL**  
**AUORORA, COLORADO 80012**

**In order to cope with emergency and everyday situations, as well as comply with requirements of the Declarations, we need the following information for confidential Association records. Please fill out and return this form with your next maintenance fee payment.**

OWNERS Name(s) : \_\_\_\_\_ , \_\_\_\_\_

Street Address : \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

OCCUPANTS Name (if rented) :  
\_\_\_\_\_

Work Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Lease expiration: \_\_\_\_\_

**IN CASE OF EMERGENCY, PLEASE NOTIFY:**

\_\_\_\_\_ Phone: \_\_\_\_\_

**YOUR MAILING ADDRESS (IF DIFFERENT FROM TOPAZ at the MALL ADDRESS):**

Name: \_\_\_\_\_

Street: \_\_\_\_\_

City : \_\_\_\_\_, State : \_\_\_\_\_ Zip: \_\_\_\_\_

If there is further information that you feel would be helpful, please add it below.  
(e.g., children, pets, handicapped needs, rental agent, vacation home address)

Please return this form to: Western States Property Services, Inc.

9145 E. Kenyon Ave., #100

Denver, Co. 80237

Phone: (303) 745-2220 Fax: (303) 745-3335