## Pheasant Creek Homeowners Association Emergency Contact Form

## Please complete and return to:

Mail:	Colorado Property Management Services, Inc.
	P.O. Box 260849 Lakewood, Co 80226-0849
Fax:	(303) 974-1774
Email:	eric@e-cpmsinc.com
Owner Cont	tact Information:
	ime(s):
Property Ac	ldress:
Off-Site Owr	ner Address:Owner State:Owner Zip:
Owner City:	Owner State:Owner Zip:
Home Phone	<del>3</del> :
Work Phone	:
Other (cell):	
Email Addre	SS:
Emorgonov	Contact Information: (Other than above this is for situations when we
	<u>Contact Information</u> : (Other than above – this is for situations when we contact you the owner and there is a real emergency involving your
property)	o contact you the owner and there is a real emergency involving your
Address:	ne:
City State 7	in.
	ip:
Priorie	
Mortgagees	:
	e:
City. State 7	ip:
Phone:	·P·
1 110110	<del></del>
<u>Homeowne</u>	rs Insurance Compan <u>y</u> :
Name:	<del></del>
Address:	
	ip:
Phone:	·
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	<u>mation</u> : (If property is rented – this information is mandatory)
Tenant Nam	e:
Tenant Phor	ne:
Tenant Ema	il:
	nt Company: (If your property is rented & managed)
Name of Cor	mpany:
Name of Cor	ntact:
Company Ac	ddress:
Contact Pho	ne:
Contact Ema	ail:
Emergency (	Contact: