

FLEMINGTON FIELDS CONDOMINIUM OWNERS ASSOCIATION

Confidential Resident Information And Compliance Affidavit

This Affidavit acknowledges that the undersigned has purchased a home in the Flemington Fields Condominium Association, an age restricted community located in Raritan Township, Hunterdon County, New Jersey. The Condominium Association is subject to the Housing for Older Persons Act of 1995, which requires the condominium association to maintain a census of the occupants of the community and their ages.

This will further acknowledge based upon my personal knowledge that each person's age is indicated below. I agree to complete and sign a census form from time to time that may be required by the Association to update this information. By my signature I swear that the statements made in the affidavit are true.

Homeowner Information

Please print:

Name: _____

Unit Address: _____

Mailing Address (if different from above): _____

Owner Status: Resident Homeowner Investor Owned (Leased Unit)

Home Phone: _____ Cell Phone: _____

Work Phone: _____ E-mail address: _____

Table with 4 columns: Resident's Name, Age, Birth Date, Relationship to owner/resident. Includes four rows of blank lines for data entry.

I wish to be included in the Unit Owners Directory: _____ yes _____ no

I hereby acknowledge that the statements made herein are true to the best of my knowledge and belief. As verification of the above information, please attach to this notice a copy of one of the following documents for each person listed above:

Driver's License Birth Certificate Passport Other official identification showing birth date

Vehicle Information

Make & Model: _____ License Plate #: _____ State: _____
Make & Model: _____ License Plate #: _____ State: _____
Make & Model: _____ License Plate #: _____ State: _____

Pets (Dogs and/or Cats Only)

Dog or Cat: _____ Dog or Cat: _____
Name: _____ Name: _____
Breed: _____ Breed: _____
License # for Dog or Cat: _____ License # for Dog or Cat: _____

Please complete emergency contact information on reverse side

Emergency Contact

The Emergency Contact will only be called if the homeowner and/or resident or tenant cannot be reached in the event of a true emergency (such as a fire or if the unit suffers damage during a storm). Your contact should have a key to access entry to your unit if necessary.

Family Member

Friend

Neighbor

Name: _____ Phone number: _____ Cell phone: _____

Family Member

Friend

Neighbor

Name: _____ Phone number: _____ Cell phone: _____

Any additional information you would like to have on file: _____

Signature

Date

Please return this form by October 16, 2013 to:

Access Property Management

4 Walter E. Foran Boulevard, Suite 311

Flemington, NJ 08822