

NEWTOWN GRANT MASTER ASSOCIATION

COMMUNITY DATA SHEET/CENSUS FORM

OWNER INFORMATION

Name: _____ Email Address: _____

Community Address: _____

Billing Address: _____

Home Phone # _____ Work Phone # _____ Cell Phone # _____

OCCUPANT INFORMATION (List all occupants and indicate if child)

Name	Home #	Cell #	Email Address

RENTAL UNIT/TENANT INFORMATION (if applicable)

Name	Home #	Cell #	Email Address

VEHICLE INFORMATION

Make	Model	License Plate #	Parking Spot (if applicable)

PET INFORMATION

Type (dog, cat)	Name	Color/Breed

Please submit this form to the clubhouse at your earliest convenience. You may mail to 360 Eagle Road, Newtown, PA 18940, Fax to 267-364-5183 or scan and email to Natalie.Fries@fsresidential.com

Thank you.

Note: This information will not be shared outside of the community!!

