



Deer Run Apartments

Basic Information

Tenant #1

Name: _____ Unit #: _____
 Home Phone #: _____ Cell Phone #: _____
 Email: _____

Tenant #1

Name: _____ Unit #: _____
 Home Phone #: _____ Cell Phone #: _____
 Email: _____

Types of Contact

Preferred Method of Contact?

Home Phone Cell Phone Email

Best Time of Day to Contact?

Morning Afternoon Evening

How would you prefer to receive property updates, notices and letters?

Home Phone Cell Phone Email

Do you have any physical, or mental health conditions we need to be aware of? (Such as seizures, risk of falling, hearing, etc. If so, please describe)

Emergency Contact

Name: _____ Phone #: _____
 Relationship: _____ Email: _____



Deer Run Apartments

Vehicle Info

Vehicle #1:

Year: _____

Color: _____

Make: _____

Model: _____

License #: _____

State: _____

Vehicle #2:

Year: _____

Color: _____

Make: _____

Model: _____

License #: _____

State: _____

Additional Notes: