

## RESIDENT REGISTER FORM

Please complete and return to our office via post / or fax / or email at your earliest convenience.

Premium Strata Pty Ltd: Suite 404, Level 4, 64-76 Kippax St, Surry Hills NSW 2010

**Phone:** (02) 9281 6440 **Email:** info@premiumstrata.com.au

### Application Details:

Strata Plan No

Address

Building Name

Apartment No.  Lot No.  Townhouse No.

Building Address

This form gives authority to Building/Strata Management to update their database with the details below and provide contact details to relevant parties for the management of the site.

**Occupancy Status**      Owner       Tenant

### Resident Details:

Primary Resident 1

**Mr**       **Ms**       **Miss**       **Mrs**       **Other**

First Name

Surname

E-mail

Home No       Mobile No

Resident 2

**Mr**       **Ms**       **Miss**       **Mrs**       **Other**

First Name

Surname

E-mail

Home No       Mobile No

## RESIDENT REGISTER FORM

Resident 3

**Mr**       **Ms**       **Miss**       **Mrs**       **Other**

First Name

Surname

E-mail

Home No       Mobile No

Resident 4

**Mr**       **Ms**       **Miss**       **Mrs**       **Other**

First Name

Surname

E-mail

Home No       Mobile No

### Agent Details:

Company Name

Contact Person

Phone       Fax

Email

### Security Devices Issued:

No. of Devices      Security Fobs       Security Keys       Remote

No. on Device               
(if applicable)

### Vehicles:

Make       Make

Model       Model

Plate Number       Plate Number

## RESIDENT REGISTER FORM

### Pets

Please refer to By-Laws for clarification. Application & written approval required.

Type of Animal

Do you have written approval to keep the animal? Yes  No

If No, you must seek written approval. Application form to provided upon request.

Exception applies to assistance animals as referred to in Section 9 of the Disability Discrimination Act, 1992 (CTH). The Owners Corporation may require you to produce evidence of the status of your animal as an assistance animal.

### Emergency Contact:

Essential: one person to call in case of an Emergency

First Name

Surname

Phone  Fax

Email

Parent  Guardian  Friend  Other

### Address for Service of Notices<sup>1</sup>:

1. Section 261 SSMA 2015 (NSW) permits an address for service of notices to be an Australian postal address or an electronic/email address.

Postal Address

**OR**

Electronic Address (including email)

### Disability or Frailty

Type of Disability

Please complete all fields of the document and submit it to Building/Strata Management. If you are a tenant, please provide a copy of your lease with this document.

#### OFFICE USE ONLY

Resident Database updated  Updated by  Date