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# TIMPHAVEN HOA

## PROPERTY REGISTRATION FORM

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Property Address: \_\_\_\_\_ Sundance, UT 84604

Lot #: \_\_\_\_\_ Plat: \_\_\_\_\_ Serial/Parcel #: \_\_\_\_\_

Registration Date: \_\_\_\_\_ Number of Parking Spots: \_\_\_\_\_

Number of Bedrooms: \_\_\_\_\_ Number of Beds: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email: \_\_\_\_\_ SMS #: \_\_\_\_\_

Secondary Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email: \_\_\_\_\_ SMS #: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email: \_\_\_\_\_ SMS #: \_\_\_\_\_

Additional Owner Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email: \_\_\_\_\_ SMS #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I/We also plan to use this property as a short-term rental. (Circle Yes or No ) Fee Paid Date \_\_\_\_\_

Registered Properties need to obtain a digital copy of Timphaven HOA's Good Neighbor Brochure and place and maintain copies in prominent locations within their property. Properties that rent, must receive acknowledgement of and an agreement with Timphaven HOA's Rules and Regulations from a designated 'responsible person' in each rental party (or Rental Properties may receive acknowledgement of and an agreement with Rules and Regulations that are more restrictive than the HOA's).

I declare that the information provided is, to the best of my knowledge, true, correct and complete. I agree to update this form, within 2 weeks, when any of the information changes. I agree to abide by Timphaven HOA's Regulations. If, as a Rental Property Owner, I use any type of property management services, I agree to require those property management companies to also abide by Timphaven HOA's Rules and Regulations.

Application by - Property Owner Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_