

**Four Seasons at Westshore Community Association
Tenant Information Sheet**

Date: _____

Property Address: _____ Sacramento, CA 95834

Homeowner Name: _____

Homeowner Phone: _____

Homeowner Email: _____

Mailing Address: _____

Leased from: _____ Leased to: _____

Tenants living in house

Name: _____

Mailing Address: _____

Phone: _____ Alt Phone: _____

Email: _____

Name: _____ Relationship: _____

Phone: _____ Alt Phone: _____

Email: _____

Vehicles

Year: _____ Make _____ Model _____ Color _____ License # _____

Year: _____ Make _____ Model _____ Color _____ License # _____

Pets

Name: _____ Breed: _____ Tag/License #(s) _____

Name: _____ Breed: _____ Tag/License #(s) _____

Emergency Contact

Name: _____ Relationship: _____

Phone: _____ Email: _____

FOR OFFICE USE ONLY

PAC: _____ Gate Remote _____ Gate Remote _____ Gate Remote _____

Vehicle Decal: _____ Vehicle Decal: _____ Vehicle Decal: _____

Key Card: _____ Key Card: _____ Key Card: _____

Guest Passes: _____ Guest Passes: _____

Please return form to: Four Seasons at Westshore
4200 Hovnanian Drive, Sacramento CA 95834