

*Marshall's Landing Homeowner's Association, Inc.*

Managed by CAMS by Stacia, 1800 2<sup>nd</sup> St., Suite 853, Sarasota, FL 34236  
Phone: 941-315-8044

## Information Form for New Owners

Name(s): \_\_\_\_\_

Current Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Email address(es): \_\_\_\_\_

Phone(s): \_\_\_\_\_  
(list area code/number—indicate if a cell phone)

\_\_\_\_\_  
(list area code/number—indicate if a cell phone)

I am planning to purchase the following Home in Marshall's Landing.

\_\_\_\_\_ 56<sup>th</sup>. Ct. East Bradenton, FL 34203

Seller name: \_\_\_\_\_

Anticipated closing date: \_\_\_\_\_

Vehicle(s) you will be bringing to Marshall's Landing:

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Tag #: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Tag #: \_\_\_\_\_

If you will be a seasonal resident, please check below, and provide a separate mailing address for the portion of the year that you will not be "in residence" Marshall's Landing:

\_\_\_\_\_ I intend to be a seasonal resident from \_\_\_\_\_ (month)  
\_\_\_\_\_ (month).

Off-site mailing address:

Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_