



*The  
Gardens*  
LA LUCIA RIDGE

## OWNERS INFORMATION

**THESE RECORDS ARE STRICTLY CONFIDENTIAL AND USED FOR THE PURPOSE OF CONTACTING THE OWNER IN RESPECT OF IMPORTANT ESTATE MATTERS.**

Please note that it is the responsibility of the owner of the property to:

1. Ensure that all information is kept updated and correct for record purposes.
2. A well observed/regularly used email address will be our primary means of contact – please ensure an email address is provided.

OWNER 1 DETAILS	
SURNAME:	
FIRST NAMES:	
ADDRESS (PHYSICAL):	
ADDRESS (POSTAL):	
PRIMARY EMAIL ADDRESS:	
CELL PHONE NUMBER:	
OCCUPATION:	
TELEPHONE (W):	
TELEPHONE (H):	
OWNER 2/ALTERNATE DETAILS	
SURNAME:	
FIRST NAMES:	
ADDRESS (PHYSICAL):	
ADDRESS (POSTAL):	
PRIMARY EMAIL ADDRESS:	
CELL PHONE NUMBER:	
OCCUPATION:	
TELEPHONE (W):	
TELEPHONE (H):	
CLOSED CORPORATION (CC) / COMPANY/ TRUST DETAILS	
COMPANY / TRUST NAME:	
ADDRESS (PHYSICAL):	
ADDRESS (POSTAL):	
PRIMARY CONTACT PERSON:	
PRIMARY EMAIL ADDRESS:	
PRIMARY CELL NUMBER:	
PRIMARY WORK TEL	
PRIMARY HOME TEL	



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\*NOTE: COPY OF DIRECTORS/SHARE HOLDERS CERTIFICATE TO BE ADVISED WITH COPY OF ID FOR ALL MEMBERS

DATE OF OCCUPANCY:	
NUMBER OF ADULT OCCUPANTS (18+)	
NUMBER OF CHILD OCCUPANTS (UNDER 18)	

OCCUPANTS AS FOLLOWS:

SURNAME	FIRST NAME/S	ID NO.	RELATIONSHIP

I, the owner/member \_\_\_\_\_ of

Address: No. \_\_\_\_\_, \_\_\_\_\_, The Gardens, La Lucia Ridge, 4019.

Do hereby confirm that all the details supplied are correct and that I will endeavour to keep the details up to date.

Signed on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ at \_\_\_\_\_

Owner/Member Signature: \_\_\_\_\_

Owner/Member Name: \_\_\_\_\_

Witness signature: \_\_\_\_\_

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