Nordic Village Homeowners Association P.O. Box 682533

Park City, UT 84068 435-640-2181 435-631-2595 Fax

admin@nordicvillagehoa.com nordicvillagehoa.com

Please note that all homeowners are required to submit this form annually by December 1st. Owners who rent their homes are required to submit this form along with a copy of the license as required under Park City Code 4-5-3 Regulation of Nightly Rentals.

Name of Owner(s):		
Mailing Address:		
Phone No(s):		
Fax No:		
Nordic Village Street Address:	<u> </u>	
Lot No(s):		
emergency:	st relative or person we can call in ca	ase you cannot be reached in an
Do you use a local Property M	lanagement Company to care for your	home?
Do you rent your home?		
If so, is it Personally or Profes	sionally Managed?	
Property Management Compa	ny:	
Manager Contact Name/Phon	e:	
•	e:	
RENTAL COMPLIANCE: Cor	nplete if you rent your home.	
Number of Bedrooms:	Number of Maximum Occupants A	Advertised:
Business License #:	Issue Date:	Exp Date:

Thank you. Please return this form as soon as possible via fax at 435-631-2595, email at admin@nordicvillagehoa.com, or mail to the Nordic Village Homeowners Association, P. O. Box 682533, Park City, UT 84068.