

3701 W. Anthem Way  
ANTHEM, AZ 85086



PHONE: 623-742-6050  
FAX: 623-742-6170

## Tenant Information Form

Homeowner (Landlord) Name: \_\_\_\_\_

Homeowner's Anthem Address: \_\_\_\_\_

Homeowner's Mailing Address: \_\_\_\_\_

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

Name of Designated Agent (if applicable): \_\_\_\_\_

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

Length of Lease: \_\_\_\_\_ Beginning Date: \_\_\_\_\_ End Date: \_\_\_\_\_

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

Tenant Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Tenant Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Vehicle No. 1 License #: \_\_\_\_\_ Make: \_\_\_\_\_ Color: \_\_\_\_\_

Vehicle No. 2 License #: \_\_\_\_\_ Make: \_\_\_\_\_ Color: \_\_\_\_\_

I (we) \_\_\_\_\_

at \_\_\_\_\_ (address) have received, read and agree to abide by the  
CC&R's, By-Laws and Rules and Regulations of the Anthem Parkside Homeowners Association knowing that  
if they are not adhered to, I will ultimately be fined for violations.

\_\_\_\_\_  
Signature of Tenant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Tenant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Homeowner or Designated Agent

\_\_\_\_\_  
Date

Please return this completed, signed and dated form to us via fax or email  
As required by ARS 33-1806.01