LAKESHORE HOMES ASSOCIATION

I HA CARFS	(Community	Action &	- RESnonce)	Questionnaire
LIIA CANLO	(<u>C</u> Ommunity	Action	, IKLOPOHSC)	Questioninane

Cluster	
Date	

This information will appear	in the LHA Homeowners' Directory.		
Home Address Home Phone			
PRINCIPAL OCCUPANTS/C	CONTACTS IN THE HOME		
Name	Name		
Email	Email		
Day Phone	Day Phone		
Cell Phone	Cell Phone		
Do we have permission to incl	lude your email in a revised cluster booklet? Yes No		
EMERGENCY INFORMATION the home's utility shut-off valve	ION - From the outside of your home, facing the front door, where are es?		
Gas			
·			
	ntial and will NOT be published. It will be kept only by LHA and your poses only. We ask that you provide this information so we can offer by or natural disaster.		
Number of people living in the ho			
realiser of people from in the field			
	ADDITIONAL ADULT OCCUPANTS		
Name	Name		
Day Phone			
Cell Phone			
EMERGENCY	CONTACTS (Please include one out-of-area, if possible.)		
Name	Name		
Email			
Day Phone			
Cell Phone			