

# WATERSCAPE CONDOMINIUMS



WATERSCAPE HOMEOWNERS ASSOCIATION, INC.  
The Association of Waterscape Co-Owners

## OWNER CONTACT INFORMATION

Waterscape Address \_\_\_\_\_  
Owner Name \_\_\_\_\_  
Owner Name \_\_\_\_\_  
Other Adult Resident Name \_\_\_\_\_  
Other Adult Resident Name \_\_\_\_\_  
Mailing Address for Official  
Waterscape Communications \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Best Phone # \_\_\_\_\_ 2<sup>nd</sup> Best Phone # \_\_\_\_\_  
Addtl Phone # \_\_\_\_\_ Text Phone # \_\_\_\_\_  
Best E-Mail Address \_\_\_\_\_  
Addtl E-Mail Address \_\_\_\_\_  
Waterscape is my/our  Primary Full-Time Residence  
 Second Residence (please complete reverse side)  
 Rental/Investment Property (please complete reverse)

## EMERGENCY CONTACT (Required)

Person **OTHER THAN ABOVE** if owners/residents cannot be reached in an emergency

Emergency Contact Name \_\_\_\_\_  
Best Phone # \_\_\_\_\_ 2<sup>nd</sup> Best Phone # \_\_\_\_\_

## SUBMITTED BY

Name \_\_\_\_\_ Date \_\_\_\_\_

*This information is for Waterscape/Ardsley Management operational use.  
Names, phone numbers and Waterscape addresses (only) are published in the Annual Directory  
provided to residents.*

*E-mail addresses are NOT published in the Directory or provided to any third parties.*

Managed by Ardsley Management. • 3002 East 56<sup>th</sup> Street • Indianapolis, IN 46244

Phone 317-253-1401 / Fax 317-259-0387

To Return Completed Form via E-Mail send to • [bmorris@ardsleymgmt.com](mailto:bmorris@ardsleymgmt.com)

**PART-YEAR & PART-TIME RESIDENTS ONLY**

Other Address (Non-Waterscape) \_\_\_\_\_  
City/State/Zip \_\_\_\_\_

**PART-YEAR RESIDENTS ONLY**

Approximate dates in residence at Waterscape From \_\_\_\_\_ To \_\_\_\_\_

**INVESTMENT / RENTAL PROPERTY OWNERS ONLY**

Tenant Name \_\_\_\_\_  
Tenant Name \_\_\_\_\_  
Other Adult Resident Name \_\_\_\_\_  
Other Adult Resident Name \_\_\_\_\_  
Best Phone # \_\_\_\_\_ 2<sup>nd</sup> Best Phone # \_\_\_\_\_  
Addtl Phone # \_\_\_\_\_ Text Phone # \_\_\_\_\_  
Best E-Mail Address \_\_\_\_\_  
Addtl E-Mail Address \_\_\_\_\_

**TENANT EMERGENCY CONTACT (Required)**

**Person OTHER THAN TENANT if tenant cannot be reached in an emergency**

Emergency Contact Name \_\_\_\_\_  
Best Phone # \_\_\_\_\_ 2<sup>nd</sup> Best Phone # \_\_\_\_\_