

**HUDSON OAKS SECTION 2 OWNER/RESIDENT INFORMATION FORM**

SECTION 2 UNIT NO. \_\_\_\_\_ DATE: \_\_\_\_\_

**OWNER INFORMATION (please print)**

FULL NAME OF OWNER(S): \_\_\_\_\_

OWNER HOME ADDRESS (if different than Hudson Oaks) \_\_\_\_\_

\_\_\_\_\_  
(City) (State) (Zip Code)

PHONE NUMBERS: \_\_\_\_\_  
(Home) (Work) (Cell)

EMAIL: \_\_\_\_\_

NUMBER PARKING SPACES OWNED: 1 or 2 (circle one) PARKING SPACE NO.: \_\_\_\_\_ / \_\_\_\_\_

**RENTER / LESSOR INFORMATION if different from above (please print)**

FULL NAME(S) OF RENTER(S) / LESSOR(S): \_\_\_\_\_

PHONE NUMBERS: \_\_\_\_\_  
(Home) (Work) (Cell)

EMAIL: \_\_\_\_\_

TERM OF LEASE: \_\_\_\_\_ / \_\_\_\_\_  
(Months / Years) (Date beginning / end of lease)

**RESIDENT EMERGENCY INFORMATION (please print)**

NAME OF EMERGENCY CONTACT \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ (RELATIONSHIP TO RESIDENT) \_\_\_\_\_

EMAIL: \_\_\_\_\_

**VEHICLE INFORMATION**

VEHICLE 1: \_\_\_\_\_  
(make) (model) (color)  
License Plate: \_\_\_\_\_  
(number) (state)

**Resident Parking Sticker No.:** \_\_\_\_\_

VEHICLE 2: \_\_\_\_\_  
(make) (model) (color)  
License Plate: \_\_\_\_\_  
(number) (state)

**Resident Parking Sticker No.:** \_\_\_\_\_

IF YOU HAVE ADDITIONAL VEHICLES, PLEASE LIST THE INFORMATION ON BACK OF THIS FORM.

Please send to RESC Corp.: Scan and Email to Star Epps [star.epps@resc-tx.com](mailto:star.epps@resc-tx.com) or Fax to 713-780-2164.  
You may call 713-780-1940 ext 3 to verify that it was received.

08/05/2018