

**Kingsport Estates West Condominium Association  
EMERGENCY CONTACT LIST**

Your Name \_\_\_\_\_

Your Address and Unit # \_\_\_\_\_

Your Current Phone # \_\_\_\_\_

Your Email Address \_\_\_\_\_

First Emergency Contact \_\_\_\_\_

First Emergency Phone # \_\_\_\_\_

Second Emergency Contact \_\_\_\_\_

Second Emergency Phone # \_\_\_\_\_

Thank you for your cooperation in this matter. Your information will not be disclosed to anyone other than the Association's Management and Board of Directors. Your privacy will be protected, and the emergency contacts will be used only in case of emergency. If two or more people reside in your unit please list at least two parties' numbers.

I/We the undersigned have received a copy of the Kingsport Estates West Condominium Association Rules and Regulations and the Declaration of Condominium Ownership and agree to abide by them as long as I/we own and live in a unit at Kingsport Estates West Condominiums. The Rules include, but are not limited to, the following four rules:

1. One dog weighing under 60 lbs.
2. No trucks of any kind or size and no heavy-duty vans with B plates or higher.
3. No exterior changes to the building including new windows without Board of Directors approval.
4. No renting without special approval of the Board of Directors.

\_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_

THIS FORM WILL NEED TO BE SIGNED BY THE PURCHASER AND RETURNED TO THE ASSOCIATION PRIOR TO THE ASSOCIATION ISSUING A PAID ASSESSMENT LETTER