

COMMUNITY INFORMATION / CONTACT UPDATE FORM

Please complete and return this form to RealManage in order to help us in making sure that we have the most accurate and up-to-date information on file.

Association Name: _____

Owner Name(s): _____

Property Address:

Mailing Address
(If different from Property Address):

Authorized Person: _____

(Person authorized to receive all information
Including financial information regarding the
property.)

Email Address: _____ 2nd Email Address: _____

Primary Phone #: _____ Alternate Phone Number: _____

I agree to accept electronic transmissions for Association Information.

(Please check one) YES_____ NO_____

Owner Signature: _____ Date: _____

2nd Owner Signature: _____ Date: _____

Please mail or email form to:

Mail: Rivo Lakes
C/o RealManage,
P.O. Box 803555, Dallas, TX 75380
Fax: 866-919-5696

Email: RIVOLAKE@CIRAMAIL.COM