



HOMEOWNER PROFILE – MOVE IN FORM

Please fax to (206) 443-1672 or email to concierge@ellingtoncondos.net ♦ 2801 1st Ave ♦ Seattle, WA 98121. Thank you.

MOVE IN DATE:		REGISTRATION FEE: Check Number _____ dated _____
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HOMEOWNER	RESIDENT 1	RESIDENT 2
Unit Address/No:		
A Second Residence:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
**Is this unit a rental unit:	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please have renter fill out separate renter profile.	
Legal Owner-Name[s]:		
Mailing/Billing Address:		
Children/other FAMILY (residing at ELLINGTON)		
Home Telephone #:		
Cell Telephone #:		
Work Telephone #:		
Fax Telephone #:		
Owner's Emergency Contact Name/Tele/Relationship:		
Email Address:	Send mailings via email. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Vehicle:	Yr / Make / License	Yr / Make / License
Pet(s):		
Bicycle(s): Make/Model/Color/Serial #		

PLEASE LIST KEY ACCESS NUMBERS BELOW OR CONTACT THE CONCIERGE FOR AN AUDIT OF ALL ACCESS KEYS.

FOB 1:	FOB 2:	Prox CARD 1:	Garage Remote 1:	Garage Remote 2:
NOTES:				

For Ellington Use Only.

- Concierge on Duty: _____
- ☐ Yes ☐ No Move procedures explained to Residents?
- ☐ Sentex number Activated by _____
- ☐ Access Device numbers Activated by _____
- ☐ Information recorded on Elevator Reservation Calendar
- ☐ Information revised in MS Outlook – contact list.
- ☐ Form E-mailed to MO
- ☐ Form E-mailed to Suhrco
- ☐ Ready to File in Unit File