

**Capitola Knolls  
Homeowners Association  
Owner Information  
Form**

UNIT ADDRESS \_\_\_\_\_

OWNER NAME(S) \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

\_\_\_\_\_

UNIT TELEPHONE NUMBER \_\_\_\_\_

HOME TELEPHONE NUMBER \_\_\_\_\_

WORK TELEPHONE NUMBER \_\_\_\_\_

MOBILE TELEPHONE NUMBER \_\_\_\_\_

E-MAIL \_\_\_\_\_

- **Effective January 1, 2020 SB 323 includes e-mail addresses in the membership list. If you would like your e-mail to NOT be provided to fellow homeowners, please check here \_\_\_\_\_**

**TENANT INFORMATION (If applicable)**

NAME(S) \_\_\_\_\_

AVAILABLE TELEPHONE NUMBER(S) \_\_\_\_\_

IS THIS A SECOND HOME?      YES \_\_\_\_\_      NO \_\_\_\_\_

**EMERGENCY INFORMATION (Contact person outside the complex)**

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

TELEPHONE NUMBER(S) \_\_\_\_\_

**Please Return to King Management  
2425 Porter Street, Suite 15  
Soquel, CA 95073**

*Office Use:*

\_\_\_\_\_ *Labels*

\_\_\_\_\_ *Directory*

\_\_\_\_\_ *QB*