



TENANT INFORMATION SHEET

Name/s of Tenants: _____

Cell Phone: _____ E-mail Address: _____

Employer: _____ Phone Number: _____

Address in Gateway Palms: _____ Lot # _____

Will you be living here full time? ____ Yes ____ No

Children living with you in this home:

How Many: ____ Ages: ____

Others living with you in this home:

Name	Relationship	Age
_____	_____	_____
_____	_____	_____

Emergency Contact Information:

Name	Relationship	Phone Number
_____	_____	_____

Tenant Signature Date

Tenant Signature Date

Revised: January 2019