

Ranch of the Sun Homeowners Association Member/Resident Information Form – Confidential

In order to provide better identification of Owners, Residents (renters) and the Vehicles that belong to them, and to update our computer database, we need this form completed as accurately as possible. There are separate sections for Legal Owner Information and for Resident-Occupant (non-owner or renter) information. (If you own the home, but do not live in it, BOTH sections need to be completed. If you live in the home, only the “Legal Owner Information” section needs to be filled in.) Once the completed form is returned to So Cal Property Enterprises, Inc. we can accurately update our files. This form will replace any and all previous Member/Resident information provided, so please be sure to return it promptly and complete it thoroughly.

Legal Owner Information	
Legal Owner Name(s):	Date of Birth:
Legal Owner Name(s):	Date of Birth:
Ranch of the Sun Property Address:	
<i>Murrieta Road, Sun City, CA 92586</i>	
Legal Owners' Mailing Address (if different than property address):	
Legal Owners' Home Phone Number:	Work No.:

Legal Owner Vehicle Information				
Make:	Model:	Year:	Color:	License No.:
Make:	Model:	Year:	Color:	License No.:
Recreational Vehicle: Make:	Model:	Year:	License No.:	

Resident-Occupant Information (To be completed by non-owner, if home is rented)	
Resident-Occupant Name:	Date of Birth:
Resident-Occupant Name:	Date of Birth:
Resident-Occupant Phone Number:	Work No.:

Resident-Occupant Vehicle Information (To be completed by non-owner, if home is rented)				
Make:	Model:	Year:	Color:	License No.:
Make:	Model:	Year:	Color:	License No.:
Recreational Vehicle: Make:	Model:	Year:	License No.:	

Legal Owner's Signature: _____ Date: _____

AGE VERIFICATION FORM

Per the Civil Code (State Law) requirements, every owner of, or person residing in, a home at Ranch of the Sun Homeowners Association must annually complete age verification form to clarify his or hers eligibility to reside in Ranch of the Sun, a senior community. All residents must attach a proof of age (copy of driver's license, birth certificate, etc.) The Association reserves the right to verify any information given below. Please mark the applicable boxes:

Part 1

All resident (both owner and non-owner) must complete Parts A, B, or C. Non-resident owners should skip to Part 2.

A. I am a person 55 years of age or older, so I qualify for residency as a senior citizen. (Skip to Part 2)

OR

B. I am not a person 55 years of age or older, but I qualify for residency as a permanent health care resident because I provide live-in, long term or terminal health care to _____ who resides in the home. (Skip to Part 2)

OR

C. I am not a person of 55 years of age or older, but I qualify for residency as a permanent qualified resident because to the facts that I have checked under 1, 2, and 3 or 4 below:

1. _____ is the persons residing in the home who is 55 or older. (Skip to 2 below):

OR

_____ was the person 55 or older who resided in the home before (mark at least one box in a, b, c or d below; then proceed to 2).

- a) his/her death; **OR**
- b) his/her hospitalization; **OR**
- c) his/her prolonged absence from the property; **OR**
- d) the dissolution of marriage

2. AND BECAUSE (Mark at least one box in a, b or c: then proceed to 3).

- a) I am 45 years of age or older: **OR**
- b) I am the spouse or cohabitant of the person identified in 1 above **OR**
- c) I am providing primary physical or economic support to a resident of the home.

OR

3. I am:

- a) A permanently physically impaired adult, dependent child of a senior resident.
- b) A permanently mentally impaired adult, dependent child of a senior resident.

AGE VERIFICATION FORM (PAGE 2)

Part 2

Only owners should complete this section. Non-owners may skip to the certification signature sections below.

I DO reside in the home identified below. My qualifications for my residency are shown in Part 1.

OR

I DO NOT reside in the home identified below. All the residents of my home are listed by name as follows: (Then proceed to Part 3)

Part 3

Certification and Signature

If I am a resident of Ranch of the Sun Homeowners Association, I have attached a proof of age to this form and I certify that it is true and correct copy of the original. I declare under the penalty of perjury under the laws of the state of California that the foregoing statements are true and correct. Executed this _____ day of _____, 20____, at _____(city), California.

Signature

Print Name

Address of Home

Please be advised that the Association to the greatest degree will maintain the information captured in the questionnaire in confidence. Your cooperation is essential to our continued right to operate as a Senior Community, and we thank you.

****PLEASE DO NOT FORGET TO ATTACH YOUR PROOF OF AGE.**
(Except Non-Resident Owners)**

Please return this completed form to:

**So Cal Property Enterprises, Inc.
1760 California Ave. #101
Corona, CA 92881**