

LAKE IROQUOIS ASSOCIATION
Homeowners Disaster and Emergency Contact Form

911 Street Address: _____ Lot Number: _____

Owners Name: _____ Phone: _____

Owners Mailing Address (if different): _____

Residents Name: _____ M / F Year of Birth: _____

Phone Number: _____ Alternate/Mobile Phone: _____

E-Mail Address: _____

Please list all occupants of the residence below:

Name: _____ M / F Year of Birth: _____

Name: _____ M / F Year of Birth: _____

Name: _____ M / F Year of Birth: _____

Name: _____ M / F Year of Birth: _____

Name: _____ M / F Year of Birth: _____

Name: _____ M / F Year of Birth: _____

Name: _____ M / F Year of Birth: _____

Name: _____ M / F Year of Birth: _____

Emergency Contact Name: _____ Relationship: _____

Phone Number: _____ Alternate/Mobile Phone: _____

Emergency Contact Name: _____ Relationship: _____

Phone Number: _____ Alternate/Mobile Phone: _____

House Color: _____ Number of Stories: _____ Basement: _____

This form is intended to gather information that can be utilized by Emergency Personnel and First Responders in the event of a natural or man-made disaster and will not be used for any other purposes other than to update LIA current homeowner records.