



THE RETREAT OF CLEMSON
HOMEOWNERS' ASSOCIATION
Post Office Box 1023
Central, South Carolina
29630

THE RETREAT OF CLEMSON TENANT INFORMATION UPDATE FORM

UNIT# _____

TENANT'S NAME: _____

MAILING ADDRESS: _____

EMAIL ADDRESS: _____

CELL NUMBER: _____



1. Do you have a vehicle using the parking lot? Yes ☐ No ☐

If yes:

Have you received a **current Parking Decal? Yes ☐ No ☐

Contact Person: _____

Cell Number: _____

*** Please note that all Tenants **must** have a current Parking Decal to park at The Retreat in Residence spots. If you answered NO, please contact DEATH VALLEY TOWING to obtain the form. You can also contact your Landlord or our Property Manager – Kimberly McCracken at 864 380-8642 for a copy.*

2. Do you have pet? Yes ☐ No ☐

If yes:

Pet's Breed and Name: _____

Weight and Color: _____

License State and Number: _____

Local Veterinarian Name: _____ -

Veterinarian Telephone Number: _____

3. **Have you received and signed THE RULES and REGULATIONS?

Yes ☐ No ☐

*** Please note that all Tenants **must** read and sign the RULES and REGULATIONS. If you answered NO, please print a copy from our website.*