



RESIDENT INFORMATION FORM

Please complete the information below and return:

by mail: P.O. Box 1181, Niceville, FL 32588 | by e-mail: manager@bam.gccoxmail.com

Owner(s) Name:

Resident(s) Name:

Street Address:

Niceville, FL 32578

Phone-Home:

Phone-Work:

Phone-Cell:

Name:

Phone-Cell (2):

Name:

Email address:

Consent to receive electronic communication from Magnolia Plantation Property Owners' Association, Inc.

Yes No

Please select one of the following related to the property:

Own Residence Rent

Contact information for the Rental Agent/Agency if applicable.

Gate Entry Info (1)

Last Name, 1st Initial to be listed in gate entry system:

Gate Entry Info (1)

Last Name, 1st Initial to be listed in gate entry system:

Note: When called from gate system received, press "9" to grant access.