

# Occupant Information Form

## Arabian Ranches



In order to keep our records up to date, we request you to complete this form. Please be assured any information you give us will remain confidential.

### Contact details

Homeowner:

Tenant:

Occupant name:

Community:

Unit no:

Street no:  
(if applicable)

Email:

PO Box:

Mobile no:

Telephone no:

Emirate:

Total number of occupants in your household:

Adults

Children

### Occupants with special needs

(For example: physically challenged, long term illness, limited mobility, wheelchair bound, etc)

  
  


I declare that I have truthfully recorded all relevant details requested of me in this form.

Occupant signature:

Date:

(DD)

(MM)

(YYYY)

### For office use only:

Are all checks conducted as per policy?

Yes

No

Records updated on system?

Yes

No

Received by:

Received date:

(DD)

(MM)

(YYYY)

Remarks: .....

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