



INFORMATION CHANGE FORM
Complete only those items that are being changed
& return form to the CSA office

Owner Name: _____

TGO Property Address: _____

Use this form to change:

- 1) your official mailing address for correspondence
- 2) names of those who will reside at your property so the gate system will allow entry
- 3) telephone and e-mail contact information
- 4) vehicle information for installation of barcodes on your vehicles
- 5) "Permanent Guest List" (guests on this list will have access to your property at any time)

Mailing Address Change:	
Address	
Address (2 nd Line)	
City/State/Zip	

Occupants of TGO Property: (Children, Renters, etc...)			
Last Name	First Name	Status/Relationship	Notes

Telephone Numbers & Email		
Type: Home/Work/Cell/E-mail	Phone Number or E-mail Address	Notes

Owner Vehicle Information						
Make	Model	Color	Year	Tag	State	Barcode # (Office use only)

Guest List: Anyone on this list will have access to your property at all times.			
Last Name	First Name	Relationship (Relative, Friend, Care Giver)	Notes

Signature _____

Date _____