

Robson Communities – Northstar Validation Form

Please complete and submit this form so that a membership account may be created/validated. Failure to complete this form in its entirety may result in delayed processing of account activation. Information provided MUST be exactly how it is shown on a driver licenses, copies may be requested by the HOA.

If you have more than one property in the same community, please list both addresses in the address section.

Have you ever been a renter, guest or owned a home in this community before? (circle one)

RENTER GUEST RESIDENT/OWNED A HOME NONE

Resident #1 Legal Name	First	Middle (full name, please)	Last
LLC Name (if applicable)			
Suffix	Circle one, if applicable Jr. Sr. II III IV		
Nickname			
Date of Birth			
Status	Circle one Resident Renter		
For Renters only	Month/Day/Year of Beginning of original lease:	Month/Day/Year of End of current lease:	
Home Phone	Please use format xxx- xxx-xxxx		
Cell Phone	Please use format xxx-xxx-xxxx		
Email			
Street Address (address you reside at within the community)			
Second Home located in same community – if applicable			
External Address	Street Address or PO Box, City, State/Province, Zip/Postal Code		
Mailing Address, if different	Street Address or PO Box, City, State/Province, Zip/Postal Code		

Office Use Only:

NS Member Number Issued:	Date Entered:	Entered By:	Attached to profile YES NO
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Other Household Members - Please enter information for others who may live with you. If there are no additional household members, you may skip this section.

Have you ever been a renter, guest or owned a home in this community before? (circle one)

RENTER GUEST RESIDENT/OWNED A HOME NONE

Resident #2	First	Middle (full name please)	Last
Legal Name			
Suffix	Circle one, if applicable: Jr. Sr. II III IV		
Nickname			
Date of Birth			
Status	Circle one: Resident Renter		
Relationship	Circle one: Spouse/Partner Parent Child Other		
Cell Phone	Please use format xxx-xxx-xxxx		
Email			

Have you ever been a renter, guest or owned a home in this community before? (circle one)

RENTER GUEST RESIDENT/OWNED A HOME NONE

Resident #3	First	Middle (full name please)	Last
Legal Name			
Suffix	Circle one, if applicable: Jr. Sr. II III IV		
Nickname			
Date of Birth			
Status	Circle one: Resident Renter		
Relationship to other household members	Circle one: Spouse/Partner Parent Child Other		
Cell Phone	Please use format xxx-xxx-xxxx		
Email			

Please return the completed form to the front desk or HOA Office. Thank you!

Office Use Only:

NS Member Number Issued:	Date Entered:	Entered By:	Attached to profile YES NO
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