

Versailles Condominium Association
701-709 South Skinker Boulevard
Saint Louis, Missouri 63105
314-721-4917

The following information is collected from prospective residents only to facilitate safety, security, and comfort for all residents of the Condominium.

Unit Number _____

Name(s) of intended occupants (+Ages if less than 18 years)

Current Address: _____ Own ___ Rent ___
_____ Years at that address _____

Current Phone Number: _____

Pet (type, size, age): _____

Employment Status/Occupation: _____

Bank Reference: _____

Email: _____

Auto: Make, Model, Color, License # --garage location will be based on vehicle size and personal mobility.

Emergency Contact:

Name: _____ If there were an emergency that required an evacuation, would help be required by residents of this unit?
Address: _____
Phone: _____ ___ NO ___ YES

New Resident Signed: _____ on Date: _____

Please hand-deliver, mail, email or fax, to the Manager.
Email: Manager@Versailles-STL.com -- FAX: 314-786-2756