



**HARVEST RUN PHASE III HOMEOWNER ASSOCIATION
RESIDENT INFORMATION FORM**

Please take a moment to complete this form for your Association file. Thank you

Homeowner(s): _____

Address: _____

Home Phone: _____

Cell Phone: _____

Cell Phone: _____

Email Address: _____

Email Address: _____

☐ **I authorize Management/Association to send me various notices via email I have provided**

**Please return to the address, fax or email
information listed below.**

P.O. Box 2545, Crystal Lake, IL 60039-2545
Office/Mobile 815.814.7088 - cmspotas@att.net