



Tovne Villas South Homes Association

Owner Information Sheet

Unit:	
Owner Name(s):	
Mailing Address, if different:	
Preferred Phone:	Alternate Phone:
Email Address(es):*	

**All email addresses will be added to the community email list. The list will not be sold or used for any purpose other than providing information related to the TovneVillas South community. Addresses are not shared with recipients. If you do NOT wish to be included on this list, please check the box below.*

☐ Please do not add my email address to the neighborhood email list

This Unit will be:

_____ My principal residence

_____ Occupied by a tenant (Complete Tenant Information sheet)

Monthly assessment payments will be made by:

_____ Direct debit from my bank account, credit card, or my own bank's online bill pay system

_____ Physical check or in person at a Truist Bank branch (coupon book required)

_____ I wish to sign up for Truist Bank's automatic payment system ("Association Pay")

_____ \$100/month

_____ \$300/quarter

Specific payment information will be sent to you after we receive this form.

Owner Signature: _____ Date: _____

Return this form to:

Victory Community Management, 5007-C Victory Blvd., #240, Yorktown, VA 23693

OR VictoryComMgt@gmail.com