

**COLBY EAST HOMEOWNERS ASSOCIATION, INC.**

**HOMEOWNERS QUESTIONNAIRE**

Dear Colby East Homeowner:

We have had the need to contact homeowners relative to needed repairs to their units, for emergency purposes, or to follow up on miscellaneous service requests. In an attempt to update our records and to more efficiently manage the Colby East property, the Board of Directors has requested that each homeowner supply us with the attached information at your earliest convenience.

Please take a moment and provide us with this information so that we may better serve the needs of the community. Please return this information in the enclosed self-addressed envelope.

Thank you for your cooperation. Should you have any questions, please feel free to contact me at 424-1540.

Sincerely,

Hans Rozestraten  
Property Manager, as Agent  
Colby East Homeowners Association, Inc.

sm  
Enclosures

**COLBY EAST HOMEOWNERS ASSOCIATION, INC.**  
**HOMEOWNER QUESTIONNAIRE**

Please return questionnaire within 10 days.

**Kenrick Corporation**  
**3495 Winton Place, D-4, Rochester, NY 14623**  
585-424-1540    www.kenrickfirst.com    585-424-1553 fax

1. Owners names (as appear on deed):  
\_\_\_\_\_
2. Unit address: \_\_\_\_\_  
  
Mailing address (if different from above):  
\_\_\_\_\_  
\_\_\_\_\_
3. Phone numbers for all occupants (for *internal* use only):  
  
Home # : \_\_\_\_\_ Cell # : \_\_\_\_\_  
Other # : \_\_\_\_\_ Other # : \_\_\_\_\_
4. E-mail Address(es): \_\_\_\_\_
5. Number of occupants (\_\_\_\_\_) and names of occupants living in unit:  
  
\_\_\_\_\_  
\_\_\_\_\_
6. Emergency Contact: \_\_\_\_\_ Phone # : \_\_\_\_\_  
  
Emergency Contact Email Address: \_\_\_\_\_
7. Vehicle Information (all must be licensed):  
  
Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_ Plate#: \_\_\_\_\_  
Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_ Plate#: \_\_\_\_\_  
Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_ Plate#: \_\_\_\_\_
8. Pets (Type, Color, Age, Weight – maximum of 2 – Cats and Dogs Only): \_\_\_\_\_  
\_\_\_\_\_
9. If this is a rental unit, please list names of all tenants as shown on your lease:  
\_\_\_\_\_
10. Term of Lease: From: \_\_\_\_\_ To: \_\_\_\_\_

Thank you for your cooperation in filing out this questionnaire.  
It is greatly appreciated.