

LAKWOOD SHORES CONDOMINIUM

Dear Lakewood Shores Condo Owner:

The Lakewood Shores Condominium Board of Managers requests that each homeowner supply Kenrick Corporation with the attached information, in the event we need to contact you regarding needed repairs, an emergency, or to follow up on other items.

Please take a moment and provide us with this information so that we may better serve the needs of the community. A self-addressed envelope is enclosed for your convenience.

Thank you for your cooperation. Should you have any questions, please feel free to contact me at 585-424-1540.

Sincerely,

Hans Rozestraten
Portfolio Manager, as Agent for
Lakewood Shores Condominium

HR/gh
Enclosure

**LAKWOOD SHORES CONDOMINIUM
OWNER QUESTIONNAIRE**

Please return questionnaire within 10 days
Kenrick Corporation, 3495 Winton Place, D-4, Rochester, NY 14623
585-424-1540 www.kenrickfirst.com

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 and names of occupants in unit: _____

6. Emergency Contact: _____ Phone #: _____

Emergency Contact Email Address: _____

7. Vehicle Information (all must be licensed):

Make: _____ Model: _____ Color: _____ Plate#: _____

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8. Pets (Name, Type, Color, Age, Weight – Maximum 1 dog 35lbs or less or 2 cats or
1 dog and 1 cat, but not 2 dogs): _____

9. Rental unit - list names of all tenants as shown on your lease, along w/phone # & email:

10. Term of Lease: From: _____ To: _____

Please include a copy of the lease when returning this form. Minimum 1 yr lease term.

Maximum of 6 units can be rented at any time – contact management company first.

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