LINDEN EAST CONDOMINIUM

OWNER QUESTIONNAIRE

Dear Linden East Condominium Owner:

We have had, on occasion, the need to contact owners regarding repairs to their unit, for emergency purposes, or to follow-up on miscellaneous requests.

In an attempt to keep our records accurate and to more efficiently manage the Linden East Condominium property, the Linden East Condominium Board of Managers has requested that each owner supply us with the attached information shortly after moving to the neighborhood and whenever a change is made to the information.

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 to Kenrick Corporation, the address is located on the top of the form.

Thank you for your cooperation.

Respectfully,

Barry Smith

Barry Smith, Portfolio Manager
As Agent for Linden East Condominium

BS/br
Enclosure

LINDEN EAST CONDOMINIUM OWNER QUESTIONNAIRE

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

1. Owners' name(s) (as appear on deed):
    _____

2. Unit address: _____

    Mailing address (if different from above):
    _____

3. Phone numbers for all owners (for *internal* use only):

    Home # : _____   Cell # : _____

    Other # : _____   Other # : _____

4. Owner's E-mail Address: _____

5. Names of all persons living in condo:

    _____   _____

    _____   _____

6. Emergency Contact: _____ Phone # : _____
                              (other than yourself)

    Emergency Contact Email Address: _____

7. Tenant Name(s):_____

    Lease Dates:_____

    Tenant phone(s) & email(s)address:_____

    Copy of signed lease & Linden East required lease rider MUST be attached!

    If not presently renting condo, do you plan to in the future?   ____Yes   ____No

8. Vehicle Information (all must be licensed):

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

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

9. Pets (Type, Color, Age, Weight): _____

    _____

Thank you for completing this questionnaire. It is very important for our files & greatly appreciated.