

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 585-424-1553 fax

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: _____ License#: _____
Make: _____ Model: _____ Color: _____ License#: _____
9. Pets (Type, Color, Age, Weight): _____

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