

**PARKVIEW PLACE CONDOMINIUM C**  
**HOMEOWNER QUESTIONNAIRE**

Dear Parkview Place Homeowner:

We have had, on occasion, the need to contact homeowners relative to needed repairs to their homes, for emergency purposes, or to follow up on miscellaneous service requests. In an attempt to keep our records current and to more efficiently manage the Parkview Place property, we request that each homeowner supply us with contact and other pertinent information.

Please take a moment to complete this form and return to Kenrick Corporation in the addressed and stamped envelope attached. This will help us better serve you and the needs of your community.

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

Sincerely,

*Miles McGregor*

Miles McGregor  
Property Management, as Agent  
Parkview Place Condominium B

MM/co  
Enclosures

**PARKVIEW PLACE CONDOMINIUM C  
HOMEOWNER QUESTIONNAIRE**

1. Owner/s Name/s (as appears on the deed) \_\_\_\_\_

2. Unit address: \_\_\_\_\_

Mailing address (if different from above) \_\_\_\_\_

\_\_\_\_\_

Phone #1: \_\_\_\_\_

Phone #2: \_\_\_\_\_

Emergency #: \_\_\_\_\_

Email Address: \_\_\_\_\_

**(Information is kept confidential and for our use only)**

3. Number of occupants (\_\_\_\_\_) and names of occupants living in unit:

_____	_____
_____	_____
_____	_____
_____	_____

4. If this is a rental unit, please list names of all tenants as shown on your lease:

_____	_____
_____	_____
_____	_____

5. Term of Lease: From: \_\_\_\_\_ To: \_\_\_\_\_

6. Vehicle Information:

Make: \_\_\_\_\_ Model: \_\_\_\_\_ License #: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ License #: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ License #: \_\_\_\_\_

6. Number and type of pets in unit: Cats \_\_\_\_\_ Dogs \_\_\_\_\_

Thank you for completing this questionnaire. Your assistance is greatly appreciated.