

COMMUNITY NAME: _____

UNIT INFORMATION

In order to keep your Association records current would you please provide the information below. This information is particularly helpful in the case of an emergency. Thank you for your cooperation in this matter.

UNIT NUMBER AND/OR UNIT ADDRESS

OWNER(S):

NAME(S) OF PERSON(S) AS THEY APPEAR ON DEED

MAILING ADDRESS

(_____) _____ (_____) _____ (_____) _____
TELEPHONE No.(Home) (Work) (EMERGENCY)

EMAIL

MORTGAGE COMPANY:

NAME

ADDRESS

DATE OF SETTLEMENT

****TENANT(S):**

NAME(S)

(_____) _____ (_____) _____ (_____) _____
TELEPHONE No.(Home) (Work) (EMERGENCY)

****Please note that if the unit is leased, a copy of the lease should be on record with the Association.**

Please return to: **Community Name:** _____
c/o COMANCO, Inc.
P.O. Box 3637
Crofton, MD 21114