

Bluestone II Condominium – UNIT INFORMATION 2018

Unit Address: _____

Owner's Name: _____

Owner's Address: _____

Owner's Phone #: _____ Cell _____ Home _____

Owner's Email: _____

Homeowners Insurance Co., name, phone number & amount of coverage: _____

Is this Unit Owner Occupied? Yes () No () If no, fill out the following:

Tenant's #1 Name: _____

Tenant's Phone #: _____ Cell _____ Home _____

Tenant's #2 Name: _____

Tenant's Phone #: _____ Cell _____ Home _____

Tenant #1 Email: _____ Tenant #2 Email: _____

Name & ages of Children: #1 _____ Age _____

#2 _____ Age _____ #3 _____ Age _____

Pets: Allowed Two Cats _____ Allowed One Dog: _____ Dog Weight: _____

Dog Breed/Color: _____ Name: _____ Lisc #: _____

Owner/Tenant #1 Vehicle: _____

(Indicate: Year, Make, Model, Color, License Plate No., State)

Owner/Tenant #2 Vehicle: _____

(Indicate: Year, Make, Model, Color, License Plate No., State)

This information is true to the best of my knowledge:

Owner Sign

Print

Date

Please fill out this form and return to:

Please return to:

Bluestone II Condo Assn

C/O Bishop Real Estate Management

PO Box 446, Nashua, NH 03061

Fax: 603-880-7171 or email: BishopRem@hotmail.com