## MORTGAGE AND TENANT INFORMATION REQUIRED PURSUANT TO CHAPTER 400 OF THE ACTS OF 1992

(Unit Owners) Name(s): Date of Closing:					
Name of Condominium Association: Owner's Mailing Address City/State/Zip:		The I	Rockaway —	at Rocky Ne	eck Condominium
(FIRST MORTGAGEE) Your Bank/Lenders Name: Mailing Address: City/State/Zip: Loan or Account Number:			  		
(SECOND MORTGAGEE) Your Bank/Lenders Name: Mailing Address: City/State/Zip: Loan or Account Number:					
(ANY OTHER MORTGAGEE) Your Bank/Lenders Name: Mailing Address: City/State/Zip: Loan or Account Number:					
INVESTOR UNIT OWNERS INFORMATION:	MUST	ALSO	PROVI	DE THE	FOLLOWING
Your Tenant Name(s):					
IS THERE AN ADDITIONAL EMERGENCY MAINTENANCE SUPPLY THE FOLLOWING INFO	AND/OR	REPAIR			
Name: Mailing Address: City/State/Zip: Telephone Number:	•				

Please return this completed form to E.P. Management Corp., 7 Tozer Road, Beverly, MA 01915