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:	<u>PC</u>	OND VIEV	W ESTAT	ES CONDO	MINIUM TRUST
Owner's Mailing Address		-			
City/State/Zip:					····
(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:			-		<u></u>
Loan or Account Number:			•		
(ANY OTHER MORTGAGEE)					
Your Bank/Lenders Name:					
Mailing Address:					
City/State/Zip: Loan or Account Number:			-		
Loan of Account Number:					
INVESTOR UNIT OWNERS INFORMATION:	MUST	ALSO	PROVI	DE THE	FOLLOWING
Your Tenant Name(s):		<u></u>			
IS THERE AN ADDITIONAL I EMERGENCY MAINTENANCE A					
SUPPLY THE FOLLOWING INFO			10 100	OK UNII:	IF SO, FLEASE
Name:					
Mailing Address:					
City/State/Zip:					
Telephone Number:			•	·	
Cell Number:					

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

This information will be kept confidential.