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

Unit Owner:		
Unit #: Date of Closing:		
Name of Condominium Association: Owner's Mailing Address City/State/Zip:	Villas a	t Ironwood 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 MUSINFORMATION:	ST ALSO PROVIDE	THE FOLLOWING
Your Tenant Name(s):		· · · · · · · · · · · · · · · · · · ·
IS THERE AN ADDITIONAL INDICEMERGENCY MAINTENANCE AND/OSUPPLY THE FOLLOWING INFORMA	OR REPAIR TO YOUR U	
Name: Mailing Address: City/State/Zip: Telephone Number:		

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