

# 1700 Park Street Condominium Association – New Owner Information Form

## CURRENT CONTACT INFO FOR SELLER:

Unit Number/Name of Seller: \_\_\_\_\_

Phone number: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

**EXPECTED (ESTIMATED) DATE OF CLOSING:** \_\_\_\_\_

## CONTACT INFO FOR PURCHASER:

Name/Company: \_\_\_\_\_

Current address of purchaser: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Type of business that will be occupying the unit: \_\_\_\_\_

Mortgage holder for purchaser (if known): \_\_\_\_\_

## CONTACT INFORMATION OF ATTORNEYS INVOLVED IN CLOSING:

Seller's attorney name: \_\_\_\_\_

Seller's attorney phone number: \_\_\_\_\_

Purchaser's attorney name: \_\_\_\_\_

Purchaser's attorney phone number: \_\_\_\_\_

Will the owner listed above be the occupant of the unit? (Y/N): \_\_\_\_\_

If not, will the owner of the unit be leasing the unit to another named person or company? (Y/N): \_\_\_\_\_

If yes, a copy of the executed lease must be provided for the Board's approval. Please note, the lessee must provide proof of insurance as well as an executed "Addendum A" (can be located on <https://1700parkstreet.net/>)

**PLEASE RETURN THIS FORM TO [1700parkcondo@gmail.com](mailto:1700parkcondo@gmail.com)**