

Arbor Hills Condominium Association

c/o MeadowManagement Inc.

27780 Novi Road, Suite 110, Novi, MI 48377

Phone: (248) 348-5400 Fax: (248) 348-5960 Email: mmi@meadowmgmt.com

Tenant Information Form

Name(s): _____

Unit Address: _____ Unit #: _____

Home Phone: _____ Cell Phone: _____

Other Phone: _____ Email: _____

.....
Emergency Contact Information

Please list any Emergency Contacts below:

Name: _____ Ph #1 _____ Ph #2 _____

Name: _____ Ph #1 _____ Ph #2 _____

.....
Master Deed, Bylaws, Rules & Regulations

I have received a copy of Arbor Hills Master Deed, Bylaws, and Rules & Regulations and agree to abide by the same.

Tenant's Signature: _____ Date: _____

Please return this Tenant Information form to:

Arbor Hills Condominium Association
c/o MeadowManagement, Inc.
27780 Novi Road #110
Novi, MI 48377

(248) 348-5400 office (248) 348-5960 fax email: mmi@meadowmgmt.com