## MASTRE PROPERTY MANAGEMENT LTD.

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## Personal Information Sheet

Name:	Date of Birth:		
Resident of Canada: YES NO	Sin:		//
Property Address:	Postal (	Code:	
Super Box (Mailbox) Location:		Row:	Box:
Parking Stall # Storage = Condo Manager:			
Smokers: OK [] No [] Pets: [] None [] All Care Tenant to Pay: Water [] Electrical [] Heat []			
Items to be looked after by Mastre for Owner: Insurance Premium [] Lawn Maintenance []	Lake/P	ark Fee's [ ]	Sprinkler Blowout [ ]
Other Expenses:	Ant	icipated Date	e of Return:
Employer:Local Contact:			
Mailing Address for Statement Purposes:	Res:		
email:	H. Fax:		
Insurance Co:Agent:Phone:	Agent:		
Rental Income Deposited to: Bank and Branch:			
Bank Address:  Postal Code:	_ Accoun	t Number: _	
Non-Res Address if Different from Statement:	Other N	otes:	