

# RANDOLPH PLACE RESIDENCES

165 N. Canal Street, Chicago, Illinois 60606

Phone 312/627-1332 Fax 312/627-1335



## UNIT OWNER CHANGE FORM



Unit changes will not be recognized at Randolph Place Residences unless a Unit Change Form is completed and submitted to the management office. Submit the Unit Change form if you are moving into Randolph Place as a new owner, a new renter, an additional resident moving in with an existing resident, or an owner who wishes to inform us of an address change for assessment statements and correspondence. Closing documents must accompany ownership changes, and a lease must accompany rental changes.

### Please Check One:

- Owner Change
- Additional Resident in Unit
- Address or Other Change

➤ **Closing Date:** \_\_\_\_\_ **UNIT #:** \_\_\_\_\_ **PK SPACE#:** \_\_\_\_\_

### ➤ **New Owner (1)**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

New Home Phone: (312) \_\_\_\_\_ Email \_\_\_\_\_

### ➤ **New Owner (2)**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

New Home Phone: (312) \_\_\_\_\_ Email \_\_\_\_\_

### ➤ **Additional Resident** *(if applicable)*

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

New Home Phone (312) \_\_\_\_\_ Email \_\_\_\_\_

**PARKING GARAGE INFORMATION:**

**PARKING SPACE #1:**\_\_\_\_\_

Automobile Make/Model:\_\_\_\_\_

Automobile Color/Year:\_\_\_\_\_

License Plate #:\_\_\_\_\_ State:\_\_\_\_\_

**PARKING SPACE #2:**\_\_\_\_\_

Automobile Make/Model:\_\_\_\_\_

Automobile Color/Year:\_\_\_\_\_

License Plate #:\_\_\_\_\_ State:\_\_\_\_\_

**OWNER'S BILLING ADDRESS** *(if living off-site):*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Will any person(s) under the age of 18 live in the unit?**     Yes         No

*If yes, please provide:*

Name(s)	Date of Birth

**Person to Contact in Case of an Emergency**

Name \_\_\_\_\_ Phone \_\_\_\_\_

**Do you have a handicap that would require assistance in case of an Emergency in the building?**         Yes         No

**Do you have a pet?**     Yes         No

*If yes, you must register your pet, using the Pet Registration Form.*

"I, as the new Owner(s), have read and agree to be bound to the Declaration and the Rules and Regulations of the Randolph Place Residences Condominium Association. I also certify that the facts contained in this application are true and complete."

Signature \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_