

PARK PLACE OF ITASCA HOMEOWNERS' ASSOCIATION
Census Form
Year 2024

Address: _____ Owner Occupied: _____ Rental Unit: _____

(All rental units are required to have a copy of the lease on file with the Management Office)

Full Name of Owner(s) _____

Email Address: _____

Full Name of Co-Owner (if applicable): _____

Cell Phone #: _____ Other #: _____

Homeowner's Insurance Information: (Required to be on file in Management Office)

Homeowners Insurance Company: _____

Policy #: _____ Agent's Name: _____ Phone# _____

Leased Unit: Please List All Names of Tenants Occupying Your Unit: (Add additional info on back of sheet)

Full Name:

Please list all Automobiles: (Add additional info on back of sheet)

Year & Model

Color

License #

Sticker #

Please complete the information on this census form and return to: Foster Premier Inc., 750 West Lake Cook Road, Suite 190, Buffalo Grove, Illinois 60089 or return via email to: stillinghast@fosterpremier.com