

**LINDEN WOODS CONDOMINIUM ASSOCIATION**  
**CENSUS CARD-- 2025**

	Owner Information	If rented, provide tenant information
Name		
Address		
Unit Number		
City, State, Zip		
Home Phone		
Cell Phone		
E-Mail Address		

Homeowner/Renter Insurance Co: \_\_\_\_\_ Policy # \_\_\_\_\_

Agent (IF ANY): \_\_\_\_\_ Phone: \_\_\_\_\_

List all occupants and their ages.

	Full Legal Name	Age
1.		
2.		
3.		
4.		

Name to appear on mailbox tag: \_\_\_\_\_

Phone number for front door intercom: \_\_\_\_\_

Locker Number: \_\_\_\_\_

PETS? Yes ☐ No ☐ Description and weight: \_\_\_\_\_

List all vehicles.

	Make/Model	Color	Year	License #	Parking Sticker #
1.					
2.					
3.					

Contacts in case of emergency (preferably someone with a key):

Name 1: \_\_\_\_\_ Phone: Home: \_\_\_\_\_ Work: \_\_\_\_\_

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

Name 2: \_\_\_\_\_ Phone: Home: \_\_\_\_\_ Work: \_\_\_\_\_

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

I hereby acknowledge all information on this card is valid and (CHECK APPROPRIATE BOX)

- a) ☐ authorize all Association notifications to be sent to my email address noted on this card, rather than by hard copy. I consider all such communication to be adequate notice of Association issues. If there are any changes in the future, I will agree to notify the Association in writing.
- b) ☐ authorize the Association to only send me all correspondence/notices via U.S. First Class Mail.

Owner's Signature \_\_\_\_\_ Date: \_\_\_\_\_

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