



4700 Arbor Court | Decatur, Illinois | 62526

Proof of Condo Insurance for Servicing Agent  
And Automatic Notices Request

Owner Name \_\_\_\_\_

Property Address \_\_\_\_\_ Arbor Court, Decatur, IL 62526

Insurance Company \_\_\_\_\_

Insurance Company Address \_\_\_\_\_

Agency \_\_\_\_\_

Policy Number \_\_\_\_\_

Renewal Date \_\_\_\_\_

Under The Declaration of Arbor Meadows Retirement Condominiums Section 10C, Page 7, proof of insurance is required. Please send proof of insurance and automatically send renewal and cancellation notices to:

Insurance Director, Arbor Meadows Condominiums  
4700 Arbor Court  
Decatur, IL 62526

If you have any questions, please contact PJ Waltenberger, 217.872.6520.

\_\_\_\_\_ Signature Property Owner

\_\_\_\_\_ Date