

# yourpeaceofmind™

Property. Different. Customized. Good Business. Management.

Your Peace Of Mind, Inc.  
P.O. Box 2148 • Howell, MI 48844

Phone: 517.545.3900 Fax: 517.552.4476  
e-mail [yym@yyminc.com](mailto:yym@yyminc.com) [www.yyminc.com](http://www.yyminc.com)

---

## OWNER INFORMATION

Community Name: \_\_\_\_\_  
Owner Name: \_\_\_\_\_  
Unit Address: \_\_\_\_\_  
Mailing Address: (if different than unit) \_\_\_\_\_  
Mailing City, State & Zip: (if different than unit) \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
e-mail Address: \_\_\_\_\_  
Name of Mortgage Company: \_\_\_\_\_  
Address of Mortgage Company: \_\_\_\_\_  
Mortgage Account Number: \_\_\_\_\_

## EMERGENCY CONTACT INFORMATION

In case of an emergency, who has a key to your unit? \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

## VEHICLE INFORMATION

Vehicle #1 Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Plate #: \_\_\_\_\_  
Vehicle #2 Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Plate #: \_\_\_\_\_

## LEASING INFORMATION

Does Co-Owner or Family Member occupy your unit? Yes No  
If unit is not occupied by your family, have you enclosed a copy of your lease? Yes No  
Tenant(s) Name: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

I certify that this unit is not leased and is only occupied by the co-owner of record or an immediate family member:

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

*Please return this completed form by fax, mail or e-mail to the address at the top of the page.*