

**CONCERTO LOFTS CONDOMINIUM ASSOCIATION
OWNER/TENANT CHANGE OF INFORMATION FORM**

FOR EXISTING OWNER OR TENANT

DATE SUBMITTED: _____

UNIT # _____

NAME: _____

***Only make notations for those items you would like changed or deleted.
All information in upper right corner and signature at bottom are required to process your requested changes.***

BILLING ADDRESS: _____

TENANT(S) NAME: _____

ADDRESS: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: BUSINESS: () _____

PHONE: BUSINESS () _____

FAX: () _____

FAX: () _____

HOME: () _____

HOME: () _____

E-MAIL: _____

E-MAIL: _____

Please send your completed form to:

CONCERTO LOFTS CONDOMINIUM ASSOCIATION
c/o Action Property Management
901 South Flower Street
Los Angeles, CA 90015
P: (213) 622-2299
F: (213) 622-2949