



Chambers Franklyn

STRATA MANAGEMENT

Property Address _____

To ensure we have your current contact details, please complete and return this form at your earliest convenience. This request is consistent with the provisions of Section 35A of the Strata Titles Act 1985.

Unit / Lot / Suite Number: _____

Owner name(s):

Contact name(s) if owner is a company:

Contact telephone / facsimile number(s) / email address:

Telephone: _____ Telephone: _____

Mobile: _____ Mobile: _____

Facsimile: _____ Email: _____

Address for correspondence:

Managing agent or tenant details if not owner occupied:

Signature _____

Signature _____

Please respond as follows:

By post: PO BOX 210

KARRINYUP WA 6921

or by fax: 9440 6244

or by email: strata@chambersfranklyn.com.au