

6(D) Request Form

Property: Tremont on the Common
Managing Agent: First Service Residential

Unit Being Sold: _____
Parking Space Being Sold: _____

Account Number _____

Current Owner (SELLER)

New Owner(s) BUYER(s)

As indicated on DEED

Name: _____
Address: _____
Tel# _____
Condo Fee Amt: _____

Name(s): _____
Current Address: _____
Tel# _____
Email: _____

Intent of Purchase

Do you have direct debit Y/N _____
Do you have Storage Bin Y/N _____ Bin # _____
Do you have Bike Space Y/N _____ Space # _____

Owner Occupy _____
Investment _____
Refinance _____

Closing Date: _____

Date fees are paid through: _____
(Always the last day of the month)

Account Balance: _____ Verified By: _____

Where should we send the 6D Certificate once completed:

Additional Comments: **\$50 Charge for 6D Certificate**

Please Send Request To:

**Tremont on the Common
Katie Killoren
Manager of Resident Services
151 Tremont Street
Boston, MA 02111**

Email: Katie.Killoren@fsresidential.com

Fax: 617-482-8676