Name of Residential Condominium Assn.	Address	CT Tax Registration Number (If none, explain)	Federal Employer ID #
Name of Service Provider	Address	CT Tax Registration Number (If none, explain)	Federal Employer ID #
General Description of services being rend	ered to residential condo	ominium association by service provider	
Period covered by this certificate:			
(Calendaria)	dar Year)	
	Declaration by	Condominium Association	
association of whichuniverse was obtained from unit owners. In accordance with Conn. Agencies the same percentage of any charges industrial, commercial, or income-pr	Regs. §12-407(2)(i) s made to this conducting real proper	ertificate, there were units in d by their owners as dwellings. This info of the units of	ormation concerning occupancy units were not owner-occupied, provider rendering services to
schedules and statements) and, to the	he best of my know	ave examined this return or document wledge and belief, it is true, complete, to DRS is a fine of not more than \$5,000	and correct. I understand the
Name of Condominium Association			
By: Signature of Principal Officer		Title Date	