

ANN ARBOR TOWER PLAZA CONDOMINIUM ASSOCIATION

Name: _____

Phone: _____

Email: _____

Testimonial:

What brought you to the community (Check all that apply)?

Location Price Amenities Architecture

Are you (Check all that apply)?

Tenant Owner Retiree Student Business Owner

Would you recommend Ann Arbor Tower Plaza to a prospective buyer? Yes No

Are you willing to allow Ann Arbor Tower Plaza to utilize your testimonial in publications or marketing materials? Yes No If yes, please sign: _____



Disclaimer: Contact information will NOT be included in any publications or marketing materials (only names).